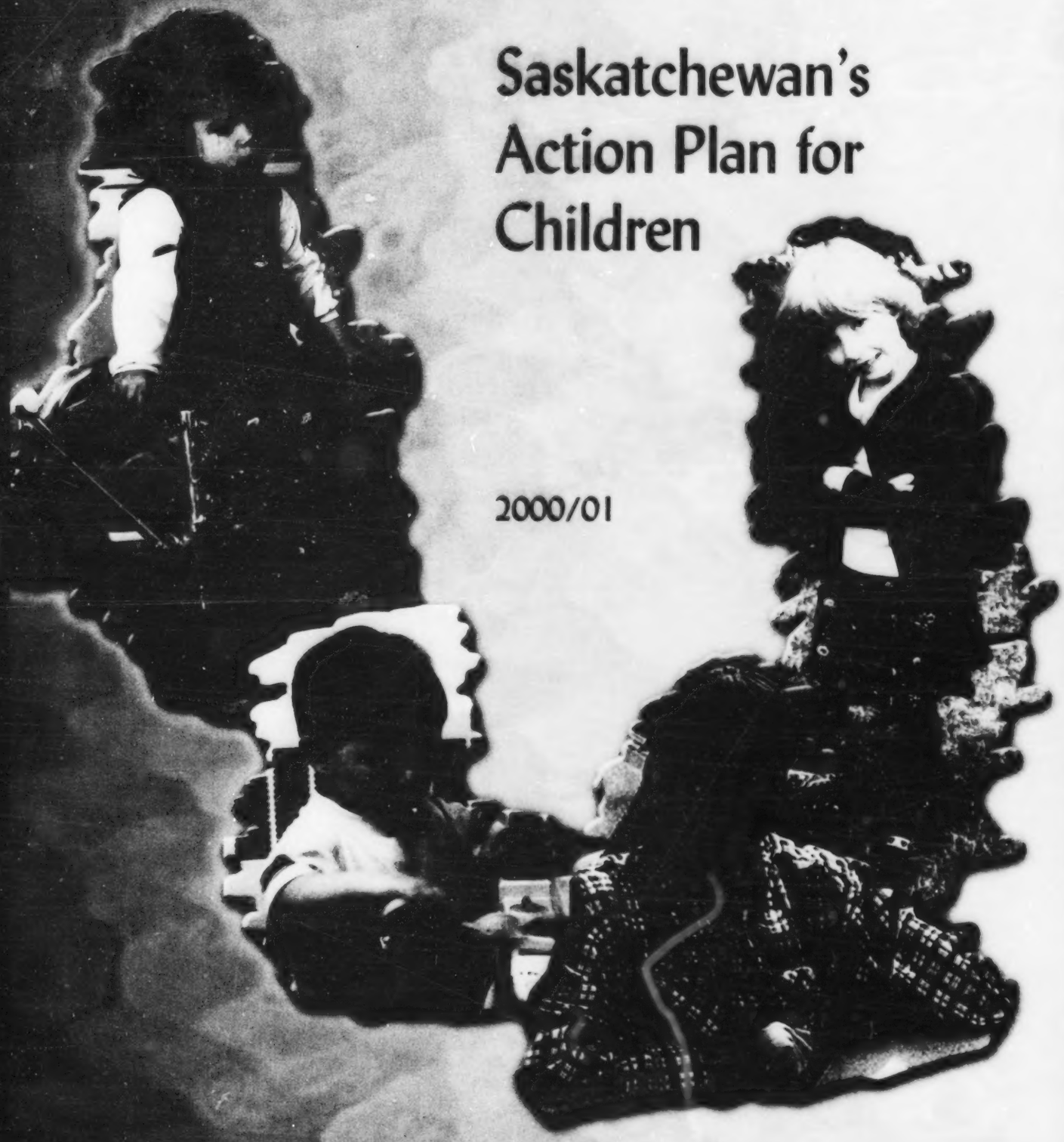
Government of Saskatchewan

Annual Progress Report

Saskatchewan's Action Plan for Children



2000/01

February 2001

Dear Friend/Colleague:

As lead Minister for *Saskatchewan's Action Plan for Children*, it is my pleasure to provide you with a copy of the *Action Plan's* first Annual Progress Report. On behalf of the other eight participating Ministers, I invite you to read this report and familiarize yourself with the outstanding work being done by you and your partners in the community and government, to improve the lives of Saskatchewan children and families.

To more effectively track our progress in achieving our shared goals for children and their families and to highlight the many promising new programs occurring across the province, we replaced our yearly budget "flyer" with a more comprehensive Annual Report.

It focuses on:

- how children and families in Saskatchewan are doing;
- promising new approaches and programs; and
- new program highlights for 2000/2001.

Our province can be proud of the pioneering work of *Saskatchewan's Action Plan for Children* and the accomplishments we have made together since the *Child Action Plan* began in 1993.

Sincerely,

Harry Van Mulligen

Information on the Internet

Additional information on *Saskatchewan's Action Plan for Children* is available on the Internet at:
www.gov.sk.ca/socserv/infocntrl/stratdir/SAPFC/SAPCHome.htm

On this site you will find a variety of fact sheets and publications, a series of six Human Services Integration Forum Handbooks, reports from Saskatchewan's Council on Children and details of Action Plan budgets and programs from 1994 to the present.

101-06714/

Contents

Introduction 5

Children Are Valued 8

Family Structures Are Changing 9

Promising New Approaches — Provincial 9
Custody and Access Workshops 9
Custody and Access Parent Education Program 10
Early Childhood Development Strategy 10
A Framework for Cooperation 11

Promising New Approaches — Local 12
Nipawin Strategic Alliance Committee 12
Roundtables in Regina 12

Children Are Safe and Secure 13

Exposure to Violence 13

Promising New Approaches - Provincial 14
Special Committee to Prevent the Abuse and Exploitation of Children Though the Sex Trade 14
Children Who Witness Domestic Violence Program 14

Good Quality Housing 15

Promising New Approaches - Provincial Level 15
Saskatchewan Housing Initiatives 15

Economic Independence 16

Promising New Approaches - Provincial 17
Building Independence 17

Child Care 18

Promising New Approaches - Provincial 19
Community Solutions Initiative 19

Promising New Approaches - Local 19
Meadow Lake - Play to Learn Program 19

Parenting Practices 20

Promising New Approaches - Provincial 21
Parenting Education 21
The Healthy Parenting Home Study Program 21

Promising New Approaches — Local 22
Families First in Saskatoon - Changing Organizational Culture 22
Wraparound in Assiniboia 22

Children Are Healthy and Reach Their Full Potential 23

Getting A Good Start in Life 23

Promising New Approaches - Provincial 24
Partnerships to Address Fetal Alcohol Syndrome and Partial Fetal Alcohol Syndrome 24
Prekindergarten Programs in Saskatchewan Community Schools 25

Promising New Approaches — Local 25
Early Skill Development Program 25
Intersectoral Research in Prince Albert 26

Childhood Injuries and Disabilities 27

Promising New Approaches — Provincial 27
Preventing Childhood Injuries 27
The Disability Action Plan 28

Emotional Health 28

Promising New Approaches — Provincial 29
Youth Suicide Intervention and Trauma Response Program 29
Teen Wellness Centres 30

Promising Approaches — Local 30
Interagency Youth Leadership Committee in Southeast Saskatchewan 30
Children's Opportunities for Healthy Development 31

Children are Socially Responsible and Engaged 31

Positive Relationships 31

Promising New Approaches — Provincial 32
The Youth Services Model 32
Serious Habitual Offender Comprehensive Action Program (SHOCAP) 33
Mind the Gap Youth Symposium 34

Theme #1 - The Media 35
Theme #2 - Inaccurate Assumptions Regarding Youth 35
Theme #3 - Making Decisions 35
Theme #4 - Tokenism and Logistics of Youth Representation 35
Theme #5 - Youth Sexual Health and Ill Health 36
Theme #6 - Involving Youth at Risk 36
Theme #7 - Youth Leadership/Skill Development 36

Promising New Approaches — Local 37
Green Tree Vocational Forestry Program 37

Children Are Knowledgeable and Skilled 37

Literacy is one of the Keys to Lifelong Learning 37

Promising New Approaches — Provincial 37
The Family Literacy Initiative 37

Children and Youth Succeed in School 38

Promising New Approaches — Provincial 39
Special Education Review 39
Role of Schools Dialogue 39
Community Schools 39
Aboriginal Elder/Outreach 40

Children and Youth Participate in Organized Sporting Activities 40

Youth Participate in Nature-Related Activities 40

Promising New Approaches — Provincial 41
Saskatchewan Lotteries Trust Fund for Sport, Culture and Recreation — The Provincial Delivery System 41
Spruce Krew Kids Klub 41

Children Are Culturally Connected 42

Promising New Approaches — Provincial 42
National Aboriginal Youth Strategy 42

Promising New Approaches — Local 43
Urban First Nations Services 43

Children's Budget for 2000 - 2001 44

Young Children Get a Good Start in Life 44

Addressing the Needs of Vulnerable Children and Youth 44

Strengthening Communities 45

Next Steps and Conclusion 46

End Notes 49

Introduction

The future of our province and society at large depends upon the well-being of children and their families. *Saskatchewan's Action Plan for Children* is a framework that outlines what we want for all children and their families. The *Action Plan* is a long-term provincial strategy that cuts across boundaries and mandates within government and in communities to create integrated plans and implement co-ordinated responses to enhance the well-being of Saskatchewan children. It provides us with an agreed-upon vision, beliefs, principles and goals for addressing the many needs of children and families through collective action. The *Child Action Plan* focuses on the many factors that affect healthy childhood development including parenting, education, housing, family health, cultural connections, coping practices, social support and adequate income. It recognizes that we are all responsible for ensuring the health and well-being of the province's children.

Saskatchewan's Action Plan for Children originated in 1993 with the release of a public discussion paper and consultations with various groups, individuals and communities. Today, eight government departments and one secretariat are involved in the *Action Plan* as are hundreds of Saskatchewan communities, agencies and organizations. Government partners include: Social Services; Education; Post-Secondary Education and Skills Training; Office of Northern Affairs; Municipal Affairs, Culture and Housing; Health; Justice; Intergovernmental and Aboriginal Affairs and the Saskatchewan Women's Secretariat.

One of the most significant tenets of *Saskatchewan's Action Plan for Children* is government and communities working together to enhance the well-being of children and families. At the community level, numerous Child Action Plan Committees identify priorities and work toward local solutions. Building on the work at the local level, nine Regional Intersectoral Committees (RICs) across the province facilitate integrated local and regional planning, and delivery of services. RIC membership is broad, encompassing representatives from a variety of human service agencies and government departments.

Each spring for the past seven years, *Saskatchewan's Action Plan for Children* has publicly reported on new initiatives and activities from across the province. This report marks a new way for the *Action Plan* to report to our stakeholders and the public at large by focusing on the progress of our collective efforts across the province at both the government and local levels to improve the lives of Saskatchewan children and families. It reports on:

- how children and families in Saskatchewan are faring;
- promising new approaches and programs; and
- new program highlights for the 2000/01 fiscal year.

Our collective vision is that all Saskatchewan children will grow in environments that support their well-being and enable them to reach their potential.

For each goal of the *Child Action Plan*, the report provides a synopsis of how well our children, youth and families are doing. This is followed by a description of various initiatives at the provincial and local levels that have the potential to reverse negative trends.

To move forward on this vision, we have established the following goals to ensure children are:

Valued — Children's needs are specifically addressed and given priority in the development of the legislation, policies, programs and services that effect their well-being. All members of society, to the extent they are able, accept responsibility for recognizing, respecting and responding to the needs of children. Children are recognized as having individual rights, equal rights and protection under the law. They are given the opportunity to participate in the decisions affecting the quality of their lives. Positive social values that support the intrinsic worth and well-being of children and families are cultivated and promoted.

Safe — Children are protected from preventable harm, injury, trauma and death, physical and sexual abuse, neglect and exploitation. They enjoy healthy physical environments and are protected from environmental hazards. If, as a last resort, a child is placed away from his or her family home, the alternative is safe, secure and nurturing.

Secure — Children have adequate food, shelter, clothing and transportation. They receive adequate financial, social, emotional, recreational, and spiritual support through their families and communities. They are protected by the intervention of individuals, families, communities and the state (provincial, national and international). Where interventions by the state occur, children are given the opportunity for a permanent family environment, though the form of the family may vary with each child.

Healthy — Children are protected from preventable disease and disability and unhealthy practices. They enjoy self-esteem, self-acceptance, healthy lifestyles, and healthy social and physical environments.

Socially Responsible — Children are given opportunities to be productive, to make meaningful contributions to others, to participate in the life of the community, to value others for their individual and cultural diversity, to have a social and environmental conscience, and to be held accountable for their actions under the law.

Knowledgeable and Skilled — Children have equitable educational opportunities that give them the skills and abilities to develop to their potential. To participate effectively in a changing society, they are provided with opportunities to achieve literacy, knowledge, social and life skills.

Culturally Connected — Children are given opportunities to value, preserve, and participate in the life of their cultural communities and those of others. For First Nations and Métis peoples, positive cultural identity and connection to their culture are priority needs.

Are We Making a Difference in the Lives of Children and Families?

To track our progress in achieving our shared goals for children and families, it is important to monitor and report on the well-being of children in Saskatchewan. There are several benefits to measuring the condition of children over time. When we make observations on trends, it is possible to demonstrate that we are really making a difference and continuously improving upon our work. Focusing on outcomes integrates our policy, planning and service delivery efforts and brings greater coherance to our actions across government and communities. Another way of achieving our shared goals is by learning more about what works and using effective practices in our responses to the needs of children and their families.

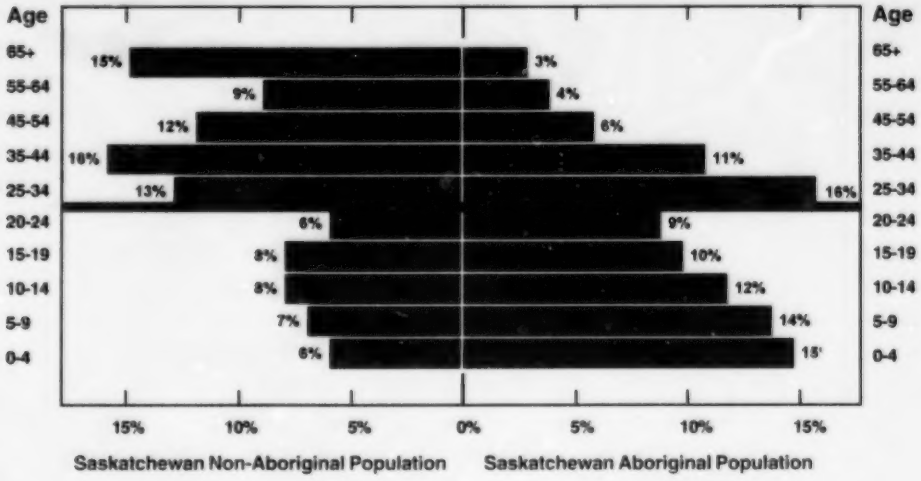
Reporting on how well children are faring requires us to look at the results of our collective actions at the federal, provincial and community levels. Since there are several initiatives and programs operating simultaneously throughout government and communities, it is impossible to attribute change in the well-being of children to specific programs or interventions.

As we move forward and begin to report on the outcomes of our collective efforts, we need to take incremental steps, work with the data we have, and build over time. This report draws on information from the *National Longitudinal Survey of Children and Youth* (NLSCY), a long-term survey designed to measure the development and well-being of Canadian children; Statistics Canada; the Saskatchewan Institute on the Prevention of Handicaps; the Saskatchewan Education Indicators Report; and other sources. As we proceed, we will be able to better identify the gaps in our knowledge and make improvements. Shifting from highlighting activities and expenditures to reporting on results enables us to gradually draw on and introduce a wealth of information about children and their development over time.

Saskatchewan's Children and Youth — Who Are They?

In 1998, 30% of the population were under 19 years of age. This represents a 34% decrease when compared to 1981. Statistics Canada estimates that this segment of the population will continue to decrease over the next five years. While Saskatchewan's population as a whole is aging, the Aboriginal population shows an opposite trend, with more than half the population under 20 years as evidenced in the following bar chart.

Saskatchewan Aboriginal Population and Non-Aboriginal Population by Age Category, 1996 Census[1]



Note: Percentages may not equal exactly 100 percent because of rounding. Aboriginal population is defined as those individuals who self-identify as Aboriginal on the Census.

Aboriginal children currently make up approximately one-third of the children in the province. By 2016 close to one-half (46.4%) of the children in the province will be Aboriginal.[2] This implies a proportionate increase of Aboriginal children as new school entrants in the public education system.

Where is Saskatchewan's population located?

A trend toward urbanization has been evident in Saskatchewan since the 1970's; however, the population shift from rural to urban areas has slowed in recent years. In 1971, 58% of the population was rural and 42% urban. Between 1976 and 1990, there was a pronounced migration of people from rural areas to urban; however, between 1990 and 1998, the rural population decreased by only 2%. In 1998, 46% of the population was rural and 54% urban.

Children Are Valued

In May 1999, the Government of Saskatchewan joined national Aboriginal leaders, federal and provincial Ministers and key partners to launch the National Children's Agenda in Saskatoon. A public discussion paper, *A National Children's Agenda: Developing a Shared Vision* was released and a public dialogue process took place over the summer. Saskatchewan people participated in national discussion groups on children's issues, augmenting the work of *Saskatchewan's Action Plan for Children.*

Feedback from the consultation process revealed that Saskatchewan people think we are more advanced in the development of a children's agenda, especially in our use of integrated approaches and working together across government and with communities. Participants commented that having a common vision, goals and values is the first step for families, communities,

businesses, the voluntary sector and governments in making Canada a society that cares about children. The consultation process reinforced the value of people working together at all levels and highlighted that partnerships between government and communities have led to many positive changes for children, youth and families in our province.

Family Structures Are Changing

Since 1986, the proportion of lone-parent families has increased from 9.6% to 13.4%; the proportion of common-law couples with children at home has increased from 1.7% to 4.4%; and the proportion of two-parent families with children has decreased from 54.5% to 44.9% in 1996. One in five Saskatchewan children from birth to age 11 experienced the divorce or separation of parents in 1994 and 1996.

The *National Longitudinal Survey of Children and Youth* indicates that increasing numbers of children live in lone-parent families. It indicates as well that over the last three decades children will experience the separation of their parents at an increasingly younger age. One in five children born between 1971 and 1973 saw their parents separate by the time they reached 11 years of age. By the time they were just over six years old, one in five children born in 1983 and 1984 had separated parents. The same proportion of children born in 1997 and 1998 were just under five years old when their parents separated.

❖ Promising New Approaches — Provincial

Custody and Access Workshops

In 1998, the release of the *Promoting Resiliency in Children and Families* discussion paper and a series of workshops helped participants articulate key issues faced by children and families during separation and divorce and agree on a Saskatchewan vision of custody and access. The Saskatchewan vision of custody and access endorsed in the 1998 workshops is:

> A future where custody and access are determined in a nurturing child-centered way through appropriate dispute resolution processes that promote child and family resiliency.

A public report on the workshops and written feedback is expected in Spring 2001.

A second paper, *Promoting Resiliency in Children and Families: Identifying Priorities* was publicly released in September 2000. Recognizing the limited resources of families, communities and government, Saskatchewan Justice is seeking input regarding what priority should be attached to the various service approaches described in the discussion paper. To this end, five multi-sector invitational workshops were held around the province during the fall of 2000, including workshops for youth and Aboriginal groups. Individuals with concerns may respond in writing to the discussion paper that is available at

Social Support Networks have been identified as a key determinant of health. Strong social support networks can help individuals and families deal with problems and maintain a sense of control over life circumstances. Supportive relationships buffer health problems and create a sense of satisfaction and well-being. Some researchers have come to the conclusion that the health effect of social relationships may be as powerful as risk factors such as smoking, physical activity, obesity and high blood pressure.

(Investing in the Health of Canadians, Health Canada*)*

court sites, the Maintenance Enforcement Office, Family Law Support Services, and on the Saskatchewan Justice web site at: **www.saskjustice.gov.sk.ca**

Saskatchewan also participates on the federal-provincial-territorial Family Law Committee responsible for a national review of custody and access issues.

Custody and Access Parent Education Program

Saskatchewan Justice delivers no-cost, province-wide parent education programs for parents experiencing separation and divorce. The curriculum has been expanded to explain the process of a separation or divorce, including the emotional impact on the parents and, most importantly, on children. These workshops help parents focus their attention on the best interests of the child when making decisions.

A children's curriculum and videos for three age categories has also been developed and distributed across the province. These tools can be used in the community, by organizations or by parents to help children understand the separation and divorce, to explore their feelings, and to better equip children to express themselves.

Early Childhood Development Strategy

Fostering healthy development for our youngest children and their families continues to be a priority under *Saskatchewan's Action Plan for Children.* Recent research provides ample evidence that experiences very early in life can influence brain development and have long lasting effects. In April 1999, Ministers responsible for *Saskatchewan's Action Plan for Children* released a draft policy framework entitled, *Building on Community Success - Creating a Long Term Plan for Saskatchewan's Youngest Children and Their Families.* This policy paper outlines a vision for a comprehensive, long-term approach to meet the needs of children from birth to age five and their families. It provides a working vision and goals for early childhood development supports and services in Saskatchewan. The objective of the document is to facilitate joint planning and action in the development of community-based early childhood development strategies over time.

A number of communities are working together to develop local networks of co-ordinated and integrated supports and services for young children. The successes these groups have already achieved are the starting point in developing a long-term plan for early childhood development in Saskatchewan. Over time, this plan can guide future investments by all partners.

One of the most significant milestones in the Government of Saskatchewan's efforts to improve the lives of Saskatchewan children and those of children across Canada, was the September 2000 agreement between the federal, provincial and territorial governments to provide significant new resources for early childhood initiatives. As a result of these efforts, approximately $73

million **new dollars** will be made available over the next five years to the province for early childhood development supports and services.

With these additional resources, implementation of Saskatchewan's *Early Childhood Development Strategy* will introduce the Universal Screening at Birth program for all newborns and their families. This new program will screen all newborns and their families who are born in hospital for risk. The strategy will also ensure that existing services in the province are better coordinated to ensure greater accessibility and responsiveness. A number of new programs and services targeting high-risk families and their children, prenatal to age five in communities with the highest need will also be introduced including:

- intensive home-visiting program,
- aggressive case finding and prenatal screening program focusing on Fetal Alcohol Syndrome Prevention, and
- additional resources for child care, early learning and family support programs.

Ongoing evaluation and public accountability are important to the success of the long-term plan. Through *Saskatchewan's Action Plan for Children*, the province will report on current investments in early childhood development and enhancements to early childhood programs. In addition, outcomes related to child health and well-being will be developed to determine whether these investments are effective and actually make a difference in the lives of children and families.

A Framework for Cooperation

A significant demographic trend in Saskatchewan is the growing percentage of Métis and off-reserve First Nations people in the provincial population. This population is predominately located in northern communities and the larger urban centers. By most estimates, at least half of all First Nations people now live off-reserve without the support of federally subsidized housing, education benefits and other services supported by the federal government for on-reserve members.

To address the concerns and hopes of this population and identify priorities on which to focus action, the Province launched a series of community discussions in late 1999. As a result of these discussions, four overall priorities were identified. They are: Education; Skills Training and Work Preparation; Jobs and Economic Development Opportunities; and Improving Individual and Community Well-Being. From there the Government of Saskatchewan developed a working document which outlines detailed objectives for each of these priorities.

On January 18, 2001, Premier Romanow announced the Government of Saskatchewan's *Framework for Cooperation Policy Statement* at Pleasant Hill Community School in Saskatoon. The Statement included a vision, principles, goals and objectives designed to integrate the work of twelve departments in responding to community priorities.

This *Framework* is based on an unprecedented partnership of 12 provincial departments led by Intergovernmental and Aboriginal Affairs, and represents the first integrated approach to addressing the issues affecting Métis and off-reserve First Nations people in Saskatchewan. As a result, the effectiveness and efficiency of provincial program services accessed by Métis and off-reserve First Nations people should improve over the short and long-term to address existing and evolving needs.

Work will now begin in partnerships across government and with Aboriginal organizations and institutions to develop initiatives to address these objectives. This strategy will intersect and link with the *Action Plan for Children. A Framework for Cooperation* sets a 20-year time frame to affect positive change. The overall goal as it relates to children is to see a significant improvement within a generation so that the children of today's children are healthier and feeling they are full participants in Saskatchewan society.

❖ Promising New Approaches — Local

Nipawin Strategic Alliance Committee

The Nipawin Interagency Committee, with over twenty members from government, local agencies and the community, has been working together over the past number of years at collaborative planning for at-risk children and families. Recently, the Committee proposed the idea of a strategic alliance to formalize a partnership agreement among a number of agencies. These agencies have agreed to identify resources to support integrated programs for at-risk children, youth and families. Key partners in the Nipawin Strategic Alliance include: the school division, Social Services, the Health District, the Town of Nipawin, RCMP, Cumberland Regional College, Métis Nation — Eastern Region II and a local First Nations organization.

The Nipawin Strategic Alliance believes in:

- identifying needs through interagency collaboration;
- supporting program development through interagency cooperation; and
- securing funding support for programs through interagency networks.

Roundtables in Regina

Since its inception in 1994, the Regina Regional Intersectoral Committee has expanded to twenty-four member agencies, departments and organizations who have a vested interest in and a commitment to working in a co-ordinated manner to enhance the quality of life for Regina residents. The committee's identified vision is for Regina to be:

> An urban/rural community in which citizens live safely, productively, and harmoniously with their basic needs met and

with opportunities for personal, social and economic development accessible to all.

The committee members share information, ideas and resources, and work cooperatively to ensure that citizens and communities are able to work toward the identified vision. There is a move away from singular perspectives toward an innovative, shared framework of understanding through day-to-day activity and through the work at the committee's roundtables.

Currently, seven roundtables work to advance Regina's human service agenda in a number of areas: Early Childhood, Food Security, North Central, Children at Risk, Youth Justice, Community Grant Funding and Data Development and Sharing. Like the *Action Plan*, work at the roundtables strives for a common government/community approach in carrying out a number of prevention and early intervention initiatives. Much of the action is focused on children and youth issues. Recently, the committee began working with the City of Regina and a range of other elected boards and authorities to explore ways to co-ordinate collective action in a number of human service areas (including program development and service implementation) to best serve the interests of Regina's families and children.

Children Are Safe and Secure

Exposure to Violence

According to *The National Longitudinal Survey of Children and Youth*, Saskatchewan children are more likely than their national counterparts to watch television shows or movies that have a lot of violence in them or to have seen violence in the home. In 1996, 36% of the children "often or sometimes" watched television shows or movies in this category, compared with 25% of Canadian children overall. While most Saskatchewan children (88%) have never witnessed adults or teenagers physically fighting, hitting or otherwise trying to hurt someone else in the home, almost 5% of Saskatchewan children have been exposed to violence in the home. This is greater than the national incidence of exposure. Children who witness violence between their parents are at an increased risk of developing behavioural and developmental problems and are at a greater risk of becoming victims and perpetrators of violence themselves later in life.

How often do you see adults or teenagers in your house physically fighting, hitting, or otherwise trying to hurt others?[3]

Response	SK 1994	SK 1996	Canada 1994	Canada 1996
Often or sometimes	4.4%	4.7%	2.0%	2.3%
Seldom	8.6%	7.7%	6.6%	5.6%
Never	87.0%	87.5%	91.4%	92.1%

-1

with opportunities for personal, social and economic development accessible to all.

The committee members share information, ideas and resources, and work cooperatively to ensure that citizens and communities are able to work toward the identified vision. There is a move away from singular perspectives toward an innovative, shared framework of understanding through day-to-day activity and through the work at the committee's roundtables.

Currently, seven roundtables work to advance Regina's human service agenda in a number of areas: Early Childhood, Food Security, North Central, Children at Risk, Youth Justice, Community Grant Funding and Data Development and Sharing. Like the *Action Plan*, work at the roundtables strives for a common government/community approach in carrying out a number of prevention and early intervention initiatives. Much of the action is focused on children and youth issues. Recently, the committee began working with the City of Regina and a range of other elected boards and authorities to explore ways to co-ordinate collective action in a number of human service areas (including program development and service implementation) to best serve the interests of Regina's families and children.

Children Are Safe and Secure

Exposure to Violence

According to *The National Longitudinal Survey of Children and Youth*, Saskatchewan children are more likely than their national counterparts to watch television shows or movies that have a lot of violence in them or to have seen violence in the home. In 1996, 36% of the children "often or sometimes" watched television shows or movies in this category, compared with 25% of Canadian children overall. While most Saskatchewan children (88%) have never witnessed adults or teenagers physically fighting, hitting or otherwise trying to hurt someone else in the home, almost 5% of Saskatchewan children have been exposed to violence in the home. This is greater than the national incidence of exposure. Children who witness violence between their parents are at an increased risk of developing behavioural and developmental problems and are at a greater risk of becoming victims and perpetrators of violence themselves later in life.

How often do you see adults or teenagers in your house physically fighting, hitting, or otherwise trying to hurt others?[3]

Response	SK 1994	SK 1996	Canada 1994	Canada 1996
Often or sometimes	4.4%	4.7%	2.0%	2.3%
Seldom	8.6%	7.7%	6.6%	5.6%
Never	87.0%	87.5%	91.4%	92.1%

❖ Promising New Approaches - Provincial

Special Committee to Prevent the Abuse and Exploitation of Children Though the Sex Trade

On December 13, 1999, Harry Van Mulligen, Minister of Social Services, introduced a motion in the Legislative Assembly to appoint a special All-party Committee to address and make recommendations on the issue of the abuse and sexual exploitation of children and youth. Committee members Peter Prebble (NDP co-chair), Arlene Jule (SaskParty co-chair), Ron Harper (NDP), Carolyn Jones (NDP), Don Toth (SaskParty) and June Draude (SaskParty) identified the following principles to guide members through their research, deliberations and public hearings:

- every child is everyone's responsibility;
- the involvement of children in the sex trade is child abuse and the term child prostitution is not an appropriate reference to this type of sexual abuse; and
- zero tolerance for the involvement of children in the sex trade in Saskatchewan.

The Committee has held consultations with stakeholders from across the province and sought advice on the work that has been done to date by community representatives and service providers. The Special Committee heard there are several root causes that lead to sexual abuse and exploitation of children, including: poverty, abuse, family dysfunction and the lack of cultural identity.

The Special Committee is also examining legislation used in other jurisdictions along with effective approaches such as deterring offenders, long-term healing, prevention, intervention, outreach and safe refuge, education and awareness. Given that a high percentage of sexually exploited children are of First Nations and Métis ancestry, the Committee is looking forward to further input from this sector on a wide range of issues including legislative approaches. The committee will table a detailed report with recommendations to the Legislative Assembly in 2001.

Children Who Witness Domestic Violence Program

The *Children Who Witness Domestic Violence Program* operates in Prince Albert, Saskatoon, and Regina and helps children in families where domestic violence has taken place. Children exposed to violence often live in an atmosphere of fear and constant anticipation of another violent incident occurring. The program helps children understand the cycle of violence and helps them create safety plans to deal with it. Children learn to protect themselves and strengthen their self-esteem through participation in the program.

Research shows that children who witness violence can suffer the same emotional effects as children who are physically abused. *The Children Who Witness Domestic Violence Program* prevents children from developing behavioural and learning problems, which are often associated with future victim or offending behaviour. The program provides children with a safe place in which to receive counselling and learn more about their situation and feelings. The Children Who Witness Domestic Violence Program is funded by Saskatchewan Justice Victims Fund.

Good Quality Housing

The neighbourhoods where children and families live affect their development. A young person growing up in unsafe circumstances is more likely to be influenced by negative experiences than a child raised in a safe environment. We know from the *National Longitudinal Survey on Children and Youth* that four in five Saskatchewan children live in neighbourhoods that are rated by their parents as good to excellent places in which to raise children. Only four percent of children live in poor or very poor neighbourhoods.

Housing conditions are a major contributing factor to physical and mental well-being of families. According to the Canada Mortgage and Housing Corporation in 1996, 35% of off-reserve Aboriginal families were in need of core housing. The most serious off-reserve housing problems are found among young female Aboriginal lone-parents living as renters in the urban areas of Regina, Saskatoon, Prince Albert and North Battleford.[4] Families are considered to be in need of core housing if they are:

- spending 30% or more of their household income on shelter (affordability);
- living in a dwelling in need of major repair (adequacy); and/or
- living in crowded conditions (suitability).

❖ Promising New Approaches - Provincial Level

Saskatchewan Housing Initiatives

In 2000/01, as part of its continuing commitment to the housing needs of Saskatchewan families, the province announced a three-year, $9 million northern housing funding package. The funding will help address the housing needs of northern families through a combination of ownership and rental options and repair programs. Under the previous northern housing program that ran from 1997 through 1999, the province helped to provide 225 families with new housing units in northern communities. Most of the $9 million will be applied in a similar way over the next three years.

In 2000/01, the province also introduced the new four-year $120 million Centenary Fund. This fund will address specific infrastructure needs in six core areas. Of this, $5 million per year is designated to address social housing needs.

Since 1998, in southern Saskatchewan, the province added 727 units of family housing to its portfolio including 136 social housing units and 591 units of affordable housing acquired and renovated for low-income families. Saskatchewan's housing portfolio assists approximately 20,000 children in low-income families by providing them with safe, adequate and affordable housing.

The province will continue to work with its housing partners, local communities and community-based organizations toward a vision of adequate, safe housing for all Saskatchewan people. The province recently held workshops to identify community issues and priorities to help with the development of a new provincial housing strategy.

Employment and working conditions are a key determinant of health. Evidence suggests that employment has a significant effect on an individual's physical, mental and social health. Paid work provides not only money, but also a sense of identity and purpose, social contacts and opportunities for personal growth. Conditions at work (both physical and psychosocial) can also have a profound effect on people's health and emotional well-being.

(*Toward a Healthy Future — Second Report on the Health of Canadians*, Health Canada).

Economic Independence

Poverty and economic insecurity affect the ability of parents to meet their children's needs. Saskatchewan has made significant progress in reducing levels of low income over the last two decades.

The number of families on social assistance in Saskatchewan dropped by 6,721 between November 1994 and November 2000, a decrease of more than 17 per cent. All regions of the province experienced similar decreases over the same period. Lloydminster had the largest decrease, with caseloads declining by nearly 52 per cent. Regina and Saskatoon experienced 18 and 25 per cent decreases respectively.

The length of stay for families on social assistance has also decreased. For lone-parent families and two-parent families the number of months they are dependent on social assistance has decreased to 13 months in 2000 compared to 19 months in 1997.

A study of social assistance dependency rates conducted by Indian Affairs and Northern Development Canada (INAC) indicates that social assistance dependency for First Nations in Saskatchewan has decreased by almost 10% over the last three years.[5]

These decreases in social assistance dependency rates can be attributed to an improved economy, the introduction of the National Child Benefit, redesign of income security programs and effective control measures. Reductions are not due to reduced benefits or more restrictive eligibility rules.

Families with a higher incidence of low income tend to be those with young, unmarried female heads of households who have little or no post-secondary education or training and who work less than 40 hours per week in either clerical or service industry jobs.

❖ Promising New Approaches - Provincial

Building Independence

Reducing child poverty is a priority identified by both the federal and provincial governments. Saskatchewan took a lead role in the implementation of the *National Child Benefit* (NCB), an important element in a national strategy to combat child poverty. The NCB supports the direction Saskatchewan is taking on social assistance redesign and made it possible to launch the *Building Independence Strategy* in 1997/98.

When we talk about "child poverty" it can in a sense be a little misleading. Children do not live in poverty by themselves. Children live in poverty because their families live in poverty. To fulfil our promise of ensuring that Saskatchewan children are safe and secure, under the *Building Independence Strategy*, we have been working with their parents and families to remove the barriers to labour force attachment. Real jobs with real wages is the best solution to poverty, not welfare.

Building Independence is an interdepartmental and intergovernmental initiative to address child poverty by supporting individuals and families to move into and stay in the workforce. *Building Independence* includes the *Provincial Training Allowance* (PTA) delivered by Saskatchewan Post-Secondary Education and Skills Training, the *Saskatchewan Child Benefit* (SCB), the *Saskatchewan Employment Supplement* (SES) delivered by Saskatchewan Social Services, and *Family Health Benefits* (FHB) delivered by Saskatchewan Health.

The impact of the new programs has been immediate resulting in an estimated 3,800 fewer families including 8,100 fewer children relying on social assistance. These new programs more than doubled the number of low-income families receiving support from the province.

Introduced July 1, 1998, the *Saskatchewan Child Benefit* (SCB), provides a monthly allowance to assist lower income families with the cost of raising children. As of March 31, 2000, benefits were being provided for approximately 95,000 Saskatchewan children in 45,500 families including approximately 8,800 families living on reserves. This program enables families to retain their benefits as they move into the workforce.

The *Saskatchewan Employment Supplement* (SES), also introduced in July 1998, provides a monthly supplement to wages, child and/or spousal maintenance payments and self-employment earnings of lower income parents. The program assists parents with the child-related costs of going to work and supports their decision to work. In 1999/2000, an average of 5,840 families received monthly SES benefits.

The Department of Social Services is entering into a second phase of Income Security Redesign, continuing its commitment to address poverty. This phase will focus on promoting enhanced independence and successful labour market

Income and Social Status are important determinants of health. Health status improves as income increases. Income influences access to safe housing and ability to buy sufficient good food.

(*Investing in the Health of Canadians*, Health Canada)

attachment for those individuals and families receiving social assistance. It is being recognized as a key component of the province's economic development strategy — *Partnership for Prosperity.*

Tax reforms in 2000/01 will also improve the circumstances and increase the resources of low-income families. With tax reforms it is anticipated that 55,000 low-income taxpayers will no longer pay any income tax at all. Low-income families will also be eligible for a provincial sales tax rebate, more than offsetting any additional tax they will pay.

Child Care

In the last thirty years, one of the most radical changes to the family has been the entry of mothers into the paid labour force. Many children now spend a good deal of time in child care arrangements. The availability and quality of that care are increasingly important issues in understanding and promoting healthy child development.

As illustrated in the chart below, between 1994 and 1996 there was an increase from 42% to 49% in the percentage of children from birth to age six who receive non-parental child care. The increase has been even larger among children aged seven to 11 years. In 1994, 25% of this group of Saskatchewan children attended some form of non-parental child care and by 1996 the percentage doubled to 50%.

In 1996, the most common child care arrangement used for Saskatchewan children aged birth to 11 years was care in someone else's home by a non-relative (47%); this included both regulated and non-regulated settings. The next largest group was care by a sibling in their own home (28%). Almost one in five Saskatchewan children aged six to 11 years were left on their own while their parents worked.

Distribution of Children aged 0 to 11 by Usage of Non-Parental Child Care to Allow Parents to Work or Study, by Age of Child, by Saskatchewan and Canada, 1994-1995 and 1996-1997.[6]

Child Care Usage by Age	SK 1994	SK 1996	Canada 1994	Canada 1996
Age 0 to 11				
Use child care	33.2%	49.2%	32.8%	42.8%
Don't use child care	66.8%	50.8%	67.2%	57.2%
Age 0 to 6				
Use child care	42.3%	48.7%	39.6%	41.8%
Don't use child care	57.7%	51.3%	60.4%	58.2%
Age 7 to 11				
Use child care	24.6%	49.8%	26.1%	44.1%
Don't use child care	75.4%	50.2%	73.9%	55.9%

attachment for those individuals and families receiving social assistance. It is being recognized as a key component of the province's economic development strategy — *Partnership for Prosperity.*

Tax reforms in 2000/01 will also improve the circumstances and increase the resources of low-income families. With tax reforms it is anticipated that 55,000 low-income taxpayers will no longer pay any income tax at all. Low-income families will also be eligible for a provincial sales tax rebate, more than offsetting any additional tax they will pay.

Child Care

In the last thirty years, one of the most radical changes to the family has been the entry of mothers into the paid labour force. Many children now spend a good deal of time in child care arrangements. The availability and quality of that care are increasingly important issues in understanding and promoting healthy child development.

As illustrated in the chart below, between 1994 and 1996 there was an increase from 42% to 49% in the percentage of children from birth to age six who receive non-parental child care. The increase has been even larger among children aged seven to 11 years. In 1994, 25% of this group of Saskatchewan children attended some form of non-parental child care and by 1996 the percentage doubled to 50%.

In 1996, the most common child care arrangement used for Saskatchewan children aged birth to 11 years was care in someone else's home by a non-relative (47%); this included both regulated and non-regulated settings. The next largest group was care by a sibling in their own home (28%). Almost one in five Saskatchewan children aged six to 11 years were left on their own while their parents worked.

Distribution of Children aged 0 to 11 by Usage of Non-Parental Child Care to Allow Parents to Work or Study, by Age of Child, by Saskatchewan and Canada, 1994-1995 and 1996-1997.[6]

Child Care Usage by Age	SK 1994	SK 1996	Canada 1994	Canada 1996
Age 0 to 11				
Use child care	33.2%	49.2%	32.8%	42.8%
Don't use child care	66.8%	50.8%	67.2%	57.2%
Age 0 to 6				
Use child care	42.3%	48.7%	39.6%	41.8%
Don't use child care	57.7%	51.3%	60.4%	58.2%
Age 7 to 11				
Use child care	24.6%	49.8%	26.1%	44.1%
Don't use child care	75.4%	50.2%	73.9%	55.9%

❖ Promising New Approaches - Provincial

Community Solutions Initiative

The number of children with special needs attending licensed child care programs is growing rapidly in our province. One reason for this increase is that child care centre programs are being recognized by referring medical practitioners as a reasonable way of meeting the child development needs of these children and their families. In the budget announcement in the spring of 2000, $150,000 was committed to programs for special needs children. The *Community Solutions Initiative* assists communities to meet the early childhood needs of high-needs children and their families by providing funding for projects that are attached to a child care service and demonstrate community involvement and support. Examples include:

- West Side Child Care Coalition, comprised of five west side child care centres (Borden Place Child Care, Westridge Child Care, Confederation Park Child Care, First Nations Child Development Centre, and Spadina Child Care) provide services to a high-risk population with limited access to services. The project hires a speech and language pathologist who works exclusively with the five child care centres.
- Regina and District Food Bank through their Lifeskills Education Centre, provides casual and drop-in child care services by trained early childhood educators while parents attend training and upgrading courses.

❖ Promising New Approaches - Local

Meadow Lake - Play to Learn Program

As part of the *Community Solutions Initiative*, the *Play to Learn* program involves a partnership between the Meadow Lake and area Early Childhood Development Program (ECIP), the North West Health District, Meadow Lake School Division, Flying Dust First Nation, North West Friendship Centre, Meadow Lake Tribal Council, Positively Parenting, Meadow Lake Association for Community Living, and Social Services — Family and Youth Services, Child Day Care, and Community Living. These stakeholders have collaborated in the development of a family focused project to provide a continuum of early childhood services in the community of Meadow Lake.

The Meadow Lake *Play to Learn* project grew from the desire to address the waiting list for ECIP services. The project targets three to five year olds, and includes a mix of children with developmental delays and those identified at risk of developmental delay. Through play-based, age-appropriate activities and home visiting, children are able to develop:

- receptive and expressive language;
- fine and gross motor skills;
- auditory and visual attention and memory;
- social skills and self-help skills; and
- skills necessary for transition to kindergarten.

At the same time, families increase their proficiency in parenting and family skills, literacy and self-esteem. The program also supports the networking of families through parent support groups, family play groups and opportunities for socializing.

The success of the program is measured by assessing the development of children entering the program and comparing these findings to their achievement levels when they leave the program. Parent satisfaction with the program is measured through a parent questionnaire or interview.

Parenting Practices

According to the *National Longitudinal Survey of Children and Youth*, the vast majority of children in Saskatchewan (almost 92%) live in families with parents who demonstrate good parenting practices. This was true in 1994 and again in 1996. In contrast, about 8% of the children live in families that experience difficulties related to problem-solving, communication, roles, emotional responsiveness, emotional involvement, and behaviour control.

Consistent parenting refers to the consistency with which parents ensure a child follows directions. Most Saskatchewan children lived with parents who were more consistent in their parenting practices than their Canadian counterparts. In 1996, approximately 50% of Saskatchewan children, compared with 45% nationally, lived with parents who scored above the benchmark indicating consistent parenting.

Ineffective parenting is based on parents' reactions to their child's behaviour and refers to parents' use of praise and punishment. A low score indicates effective parental interactions. In 1996, 42% of Saskatchewan children had parents with scores below the benchmark indicating effective parenting compared with 50% of the children at the national level.

Rational parenting refers to the type of punishment used by parents. Between 1994 and 1996, there was a 5% increase in the number of Saskatchewan children with parents whose rational parenting style improved. The range of scores for Saskatchewan parents was broader than their Canadian counterparts suggesting that "Saskatchewan parents are firmer disciplinarians than their Canadian counterparts, but they have mellowed somewhat between 1994 and 1996 — paralleling the trend in Canada."[7]

The manner in which parents punish their children is one of the most contentious issues with which parents must deal. The vast majority of the children have parents that report they rarely or never use physical punishment when their children misbehave. In Saskatchewan, 86% of the children lived with parents who said they rarely or never use physical punishment (compared to 83% in 1994), and 14% lived with parents who sometimes use physical punishment (compared to 16% in 1994).

The number of children who had parents with high scores on the positive parenting scale (praising, laughing and doing something special with the child) increased by 6% over the two year period. However, in 1996, fewer Saskatchewan children (47%) had parents who exceeded the benchmark when compared to their national counterparts (53%).

❖ Promising New Approaches - Provincial

Parenting Education

Parents and families play the primary role in children's lives, and a nurturing, supportive family is the best foundation for good child development. At the provincial level, a variety of parenting education activities are in place. *Parenting Education Saskatchewan*, administered through Family Service Saskatchewan provides information, support and consultation about parenting education to community members and groups. The project is jointly funded through the departments of Health and Social Services. *Parenting Education Saskatchewan* maintains an on-line Parenting Education Directory available through the Internet at **http:/www3.sk.sympatico.ca/famserv.** The project also distributes Parenting Education News three times a year to approximately 850 community members and agencies and organizes a yearly provincial conference.

The *Nobody's Perfect Parenting Education Program* for parents of children from birth to five years of age offers training and support to low-income families who are young, single, and socially or geographically isolated. The program is co-ordinated on a provincial basis through the Saskatchewan Institute on Prevention of Handicaps. In 1999/2000, a total of 53 facilitators were trained at sessions in Carlyle, Regina and Saskatoon. An additional one-day trainer update workshop was held for existing facilitators and two issues of a facilitator newsletter were distributed.

The Healthy Parenting Home Study Program

SaskTel and the Institute on the Prevention of Handicaps have developed a three-year partnership (October 1999 - October 2002) to raise public awareness of the importance of parenting and the need for healthy family environments to raise healthy, happy children. Healthy parenting is the most important factor in preventing neglect and abuse.

A province-wide campaign was launched in 1999/2000, targeting expectant couples, parents of young children and the community at large. It stresses the importance of caring for children and the value of children in society. The campaign emphasizes the need for support for parents and other caregivers from family, friends and the community. As part of this initiative, Saskatchewan Health's Healthy Living Home Study Course: Healthy Parenting will be offered to Saskatchewan residents through an interactive program on the Institute's web site (**http://www.preventioninstitute.sk.ca**). This correspondence-style course enables parents to expand their knowledge on parenting in the privacy of their own homes.

Gender is an analytical concept that goes beyond biological differences to include the socially and politically constructed relationship that exists between men and women. It incorporates the relative power and influence that society ascribes men and women on a differential basis. Not all women share the same consequences of a gendered society in exactly the same way. However, many factors that affect their health and well-being, such as vulnerability to violence, higher probability of lone parenthood, and their tendency to have lower incomes and occupational status than men, are experienced by women generally.

(*Profile of Aboriginal Women*, Womens Secretariat)

❖ Promising New Approaches — Local

Families First in Saskatoon - Changing Organizational Culture

Saskatchewan's Action Plan for Children, with its focus on integration and prevention, has helped individuals and communities understand that they are greater than the sum of their parts; and that to provide the most effective and valued service, a different way of working must be developed, both within and between organizations.

In the Saskatoon area, many projects funded through the *Action Plan* demonstrate new ways of acting together to improve the lives of children and families. One good example is the *Families First* project, another community solutions initiative. *Families First* is an integrated family support program based out of a local child care centre. Families access services including nutritional counselling, parent education, behavioural management support, and a clothing depot. Transportation is available to ensure families can participate. An evening feeding program and child care are provided to make it convenient for parents to attend parent education classes in the evening. The development of this integrated service model was truly a collaborative effort involving staff and parents, the daycare board, the local housing authority and a number of community service agencies. *Families First* has been so successful that Saskatchewan Social Services, Child Day Care Branch plans to continue it as a model of best practice in the long-term.

Wraparound in Assiniboia

The community of Assiniboia in south central Saskatchewan has developed a school-based family support project using the wraparound process. The wraparound case planning process is a way to improve the lives of children and families who have complex needs.[8] Traditionally, most services accessed by families focus on the deficits within a family. Wraparound is based on the unique strengths, values, norms and preferences of the child, family and their community. All services and supports are tailored to meet the cultural needs of the child and family and are community-based. Planning, services and supports cut across traditional agency boundaries through multi-agency involvement and funding and include the input of family members at every stage.

Even though it is early, the project appears to be making a significant difference in the lives of families. Positive comments have been received from professionals in the community who have worked with the families in the past. For example, a school principal, a Social Services case worker, mental health social worker and public health nurse all say that while their involvement with these families is reduced, it is now much more productive. They see the families making progress and the families feel they have some control over their lives. A recently retired Director of Education remarked at a project review meeting, "You know you're doing something right when school board members come up and tell you about phone calls they are getting from parents thanking the board for providing this support."

Children Are Healthy and Reach Their Full Potential

Getting A Good Start in Life

A good start early in life is vital to the long-term well-being of children. The *National Longitudinal Survey of Children and Youth* confirms that the majority of the babies born in Saskatchewan and Canada are born healthy with approximately 97% of infants born considered to have a healthy birth weight.

Another potential indicator of infant health is the incidence of premature births. The rate in Saskatchewan was higher than the national average in 1994 (10.6%); however, according to the *National Longitudinal Survey of Children and Youth*, the proportion of Saskatchewan babies born within the normal range has increased over time from 88% in 1994 to 92% in 1996.

Saskatchewan's infant mortality rate in 1997 was eight to nine deaths per one thousand live births. The national infant mortality rate is 5.5 deaths per a thousand live births.

Pregnancy in adolescence is associated with a number of risks both to the adolescent mother and the infant. Due to delays in accepting the pregnancy, infrequent contacts with health professionals as well as poor nutrition and substance abuse, adolescent mothers are more likely to experience negative birth outcomes. Risks and implications for the infant include: low birth weight, pre-term birth, medical complications, and infant or maternal death. Adolescent mothers are more likely to drop out of school, require social assistance, face chronic unemployment and are often unable to address the emotional needs of their child. Many of the children of these typically lone-parent families are at increased risk of developmental problems and poor school performance. In 1997, there were a total of 1,974 pregnancies to females ten to nineteen years of age; 70% that resulted in a live birth representing 11% of all births to Saskatchewan women.[9] Only 2% of these pregnancies occurred in females under fifteen years of age.

In Saskatchewan, one in four children were born to mothers who smoked during their pregnancies. While this proportion remained the same in 1994 and 1996, there has been a decrease in smoking among Canadian mothers. In 1996, the mothers of 14% of Saskatchewan children consumed at least one drink per month, a rate that is lower than the Canadian average of 16%. The percentage of children whose mothers took prescription medication was the same for Saskatchewan and all of Canada in 1996 (at 27%). The rate of over-the-counter drug use was a bit higher and closer to 30% for both provincial and national populations.

Distribution of Children Less than Two Years of Age by Mother's Consumption of Cigarettes, Alcohol, Prescription Drugs and Over-the-Counter Drugs During Pregnancy, by Saskatchewan and Canada, 1994-1995 and 1996-1997[10].

Pregnant Mothers who . . .	SK 1994	SK 1996	Canada 1994	Canada 1996
Smoked	24.2%	24.8%	23.6%	20.2%
Consumed alcohol	14.9%	13.5%	17.4%	15.6%
Took prescription medication	23.0%	27.0%	25.2%	27.3%
Took over-the-counter drugs	30.2%	29.6%	26.8%	30.2%

Evidence suggests that positive stimulation early in life improves learning, behaviour and health in adulthood making early childhood development a powerful determinant of health. Research shows a strong relationship between the income level of the mother and the weight of the baby at birth. Mothers at each step up the income scale have babies with higher birth weights, on average, than those on the step below. This tells us that low birth weight is not simply a result of poor maternal nutrition and poor health practices associated with poverty. Factors such as coping skills and a sense of control and mastery over your life, also appear to play a part.

(Investing in the Health of Canadians, Health Canada)

❖ Promising New Approaches - Provincial

Partnerships to Address Fetal Alcohol Syndrome and Partial Fetal Alcohol Syndrome

Fetal Alcohol Syndrome (FAS) and Partial Fetal Alcohol Syndrome (PFAS) cause brain damage resulting in permanent disability, which has devastating lifelong effects on the individual and his or her family. FAS and PFAS are caused by maternal alcohol consumption during pregnancy.

The incidence of FAS and alcohol-related birth defects in Saskatchewan can only be estimated. Research in Saskatchewan in 1996 states the incidence of FAS is .585 per 1,000 live births.[11] In some disadvantaged communities the rates are much higher. There are many reasons why this hidden disability is hard to diagnose:

- there are no specific tests to diagnose FAS;
- FAS characteristics change as the child gets older;
- FAS symptoms are hard to see in babies and thus go undiagnosed; and
- the extent of the mother's alcohol consumption during pregnancy is difficult to determine.

For these reasons, some children are never diagnosed. The number of children actually diagnosed with FAS is therefore not representative of the actual rate of incidence. The financial and social costs of FAS are significant.

To prevent FAS/PFAS and to address the support needs of their caregivers, a multi-sectoral approach has been identified as an effective means. The departments of Education, Health, Justice and Social Services are collaborating with families, communities and community organizations on several activities.

Distribution of Children Less than Two Years of Age by Mother's Consumption of Cigarettes, Alcohol, Prescription Drugs and Over-the-Counter Drugs During Pregnancy, by Saskatchewan and Canada, 1994-1995 and 1996-1997[10].

Pregnant Mothers who . . .	SK 1994	SK 1996	Canada 1994	Canada 1996
Smoked	24.2%	24.8%	23.6%	20.2%
Consumed alcohol	14.9%	13.5%	17.4%	15.6%
Took prescription medication	23.0%	27.0%	25.2%	27.3%
Took over-the-counter drugs	30.2%	29.6%	26.8%	30.2%

Evidence suggests that positive stimulation early in life improves learning, behaviour and health in adulthood making early childhood development a powerful determinant of health. Research shows a strong relationship between the income level of the mother and the weight of the baby at birth. Mothers at each step up the income scale have babies with higher birth weights, on average, than those on the step below. This tells us that low birth weight is not simply a result of poor maternal nutrition and poor health practices associated with poverty. Factors such as coping skills and a sense of control and mastery over your life, also appear to play a part.

(Investing in the Health of Canadians, Health Canada)

❖ Promising New Approaches - Provincial

Partnerships to Address Fetal Alcohol Syndrome and Partial Fetal Alcohol Syndrome

Fetal Alcohol Syndrome (FAS) and Partial Fetal Alcohol Syndrome (PFAS) cause brain damage resulting in permanent disability, which has devastating lifelong effects on the individual and his or her family. FAS and PFAS are caused by maternal alcohol consumption during pregnancy.

The incidence of FAS and alcohol-related birth defects in Saskatchewan can only be estimated. Research in Saskatchewan in 1996 states the incidence of FAS is .585 per 1,000 live births.[11] In some disadvantaged communities the rates are much higher. There are many reasons why this hidden disability is hard to diagnose:

- there are no specific tests to diagnose FAS;
- FAS characteristics change as the child gets older;
- FAS symptoms are hard to see in babies and thus go undiagnosed; and
- the extent of the mother's alcohol consumption during pregnancy is difficult to determine.

For these reasons, some children are never diagnosed. The number of children actually diagnosed with FAS is therefore not representative of the actual rate of incidence. The financial and social costs of FAS are significant.

To prevent FAS/PFAS and to address the support needs of their caregivers, a multi-sectoral approach has been identified as an effective means. The departments of Education, Health, Justice and Social Services are collaborating with families, communities and community organizations on several activities.

- The Provincial Coordinating Committee chaired by the Saskatchewan Institute on Prevention of Handicaps, with representation from a variety of government departments, continues to work in the area of prevention and public awareness. For example, messages on the packaging materials at liquor stores help to warn expectant mothers about alcohol consumption.
- Interprovincially, the Prairie Northern FAS Initiative involving Manitoba, Saskatchewan, Alberta, Yukon, Northwest Territories and Nunavut is working to develop a common strategy to address FAS that considers both prevention and the support required for those affected by FAS/PFAS. By working together, the provinces can learn from one another and share expertise, best practices and resource material. Saskatchewan will host the third annual FAS conference in May 2001 in Saskatoon. This conference will focus on the issues and challenges of FAS/PFAS faced by youth, their families and communities.
- A number of departments have provided staff training related to FAS/PFAS over the last several years. The focus of these training efforts has been to increase staff awareness and the skills necessary to develop strategies and interventions to work effectively with individuals with FAS/PFAS.

Prekindergarten Programs in Saskatchewan Community Schools

Prekindergarten programs targeting at-risk three and four-year-olds are one of the successful ways of addressing the early learning needs of young children. Currently, Saskatchewan Education provides funding for 44 half-time programs in 31 Community Schools across the province. Each program serves a maximum of 16 children, totalling approximately 700 children in the program provincially. Community Schools are located in high-needs areas in North Battleford, Prince Albert, Regina and Saskatoon.

Prekindergarten programs challenge young children intellectually while they play. Programs include extensive family involvement, a developmentally appropriate education program, intensive twelve-hours per week exposure and qualified staff.

❖ Promising New Approaches — Local

Early Skill Development Program

In 1998/99, Saskatchewan Health began providing funding to Saskatoon and Battlefords Health Districts to establish intensive school and home-based early intervention programs for kindergarten and first grade children with very aggressive and violent behaviours. The *Early Skill Development Program* helps these children acquire and use more socially acceptable behaviours in their interactions with others.

Research over the first two years of the program, involving 75 children, has shown a significant reduction in aggressive and violent behaviours. In 2000/01, the third year evaluation of the program will take place. If the results remain positive, use of this program elsewhere in the province will be promoted as one that improves children's quality of life through the development of social and behavioural management skills. Reducing aggressive and violent behaviours in young children is also expected to reduce the likelihood these children will become involved with the criminal justice system as they grow older.

The physical environment is an important determinant of health. At certain levels contaminants in our air, water, food and soil can cause a variety of adverse health effects including cancer, respiratory illnesses and birth defects. Evidence indicates that the prevalence of childhood asthma has sharply increased over the past two decades, especially among the age group birth to age five. Factors related to housing, indoor air quality, and the design of communities and transportation systems can significantly influence our physical and psychological well-being.

(*Toward a Healthy Future — Second Report on the Health of Canadians*, Health Canada).

Intersectoral Research in Prince Albert

The Prince Albert Regional Intersectoral Committee (RIC) has undertaken two separate but complementary intersectoral research projects. These projects will provide this area of the province with needed information for making informed decisions about what infants, children and families need. The research will provide the RIC, the Prince Albert community and surrounding area with a local 'Action Plan.' Both projects depend on cooperation, collaboration and input from many key stakeholders in the Prince Albert area.

Understanding the Early Years is a partnership between the RIC and Saskatchewan Rivers School Division, with support from the Roman Catholic School Division and the Community Networking Coalition, a network of community-based organizations. Funded by the federal government, it is one of five such projects across the country and the only one in Saskatchewan. The study will "assess how young children are developing, explore factors that influence early development and help predict future outcomes for children." Three kinds of data are being gathered:

- The Early Development Instrument will look at kindergarten children's physical health, social competence, emotional maturity, language skills and cognitive development;
- The *National Longitudinal Survey of Children and Youth* will survey what community factors influence child outcomes; and
- Community Mapping will provide an overview of available resources for families, community services and activities and characteristics of community neighbourhoods.

Making a Difference, funded by the Associated Entities Fund, will conduct research to address early childhood development for minus nine months to three year olds within the Prince Albert region. Using a partnership process, the project is developing an integrated assessment tool and process for measuring both risk and protective factors in children. In addition, an early childhood "Eco Resource Map" is being tested for use across sectors. These research projects will create a vast collection of community knowledge and tremendous potential for community investments.

Childhood Injuries and Disabilities

According to the *National Longitudinal Survey of Children and Youth*, the rate of injury among children is a key indicator of child health. In our province roughly 11% of the children from birth to 11 years in 1994 and 1996 suffered one or more injuries in the previous twelve months. This is comparable to Canadian averages.

According to the Canadian Institute of Child Health, the death rates (for all causes of death) for Canadian children and youth between the ages of one and 19 years of age have decreased since the mid-1970s. Injuries are the leading cause of these deaths, many of which result from predictable and preventable events. Saskatchewan children and youth aged one to nine years and 15 to 19 years of age have injury death rates higher than the national average. Treaty Indian children and youth have the highest injury death rates in Saskatchewan of any population group.[12]

In 1994, the last year for which statistics are available, it was estimated that approximately 19% of Saskatchewan's population had a disability or approximately 10.2% of all the children in the province from birth to age 14. Disability rates are higher in the Aboriginal population with approximately one-third of the Aboriginal adults reporting the presence of a disability. The disability rate rose dramatically with age, from 23% for those 15 to 24 years of age to 69% for Saskatchewan Aboriginal adults 55 years and older.[13]

❖ Promising New Approaches — Provincial

Preventing Childhood Injuries

There are a number of organizations in Saskatchewan that work in the areas of preventing injuries including the Saskatchewan Safety Council, Saskatchewan Labour, the Canadian Red Cross, St. John's Ambulance, various sports-related councils and associations, Saskatchewan Parks and Recreation Association, Acquired Brain Injury Partnership Project and Saskatchewan Institute on Prevention of Handicaps.

The primary focus of the Saskatchewan Institute on Prevention of Handicaps is to develop tools that others can use, to provide data upon which communities can base decisions, and to develop and provide training programs for the prevention of specific causes of injuries as well as the general theory of injury prevention and control. The Institute has published reports on injury data from the years 1989 - 1996 and covers the population from birth to age 19. The Institute plans to publish a new report with injury data to the year 1999. Trends for injury-related deaths will be presented in that report.

The Disability Action Plan

Children and adults with disabilities have many common concerns. They face personal, social, educational, and economic barriers that prevent access to the same opportunities as other Saskatchewan citizens enjoy. For example, persons with disabilities are more likely to have lower education levels, be socially isolated and frequently face poverty and limited employment opportunities.[14] The Disability Action Plan is a process to address these issues, identify priorities and find solutions to ensure full citizenship for persons with disabilities. To attain the goal of citizenship for persons with disabilities, a partnership approach between government and community is required.

As a starting point in the development of a *Disabilities Action Plan*, 24 Community Forums were held in 11 locations across the province involving over 300 participants during the months of May and June 2000. The Community Forums engaged participants through discussion and use of a workbook entitled, *Making a Vision a Reality — A Workbook for Saskatchewan's Disability Action Plan* developed by the Saskatchewan Council on Disability Issues.

Members of the Saskatchewan Council on Disability Issues, with support from the Office of Disability Issues, have formed a writing team and identified themes arising from the Community Forums. The group aims to develop a framework for the *Disability Action Plan* along with a plan of action for government and community to work toward the goal of full citizenship for people with disabilities. It is anticipated that this Action Plan will be submitted to government in the spring of 2001.

Emotional Health

The *National Longitudinal Survey of Children and Youth* indicates that three in ten Saskatchewan children (31%) from birth to 11 years of age experienced an event causing great stress or unhappiness in 1996, a decrease from 1994 (36%). This is comparable with national averages.

The *Saskatchewan Youth Attitudes Survey* was concluded in 1996 with 2,495 students aged 13 to 18 years. Entitled *Youth Speak Out: Attitudes and Behaviours Related to Youth at Risk in Saskatchewan*, the report examines youth sexual behaviours, patterns of gambling, smoking, substance use and issues of victims and physical violence.[15] Key findings include the following:

- Almost 43% of male youth and 44% of female youth ages 13 to 18 years have sexual intercourse. Fifty-one per cent of male youth reported having unprotected sex always or sometimes compared to 59% of female youth. Seventeen per cent of youth (male and female) had four or more sexual partners. Twenty-seven per cent of male youth and 30% of female youth knew their most recent partner over one year. Four per cent of male youth and 5% of female youth had a sexually transmitted disease.
- Their sources of information on sex, birth control, AIDS and sexually transmitted diseases were media, teachers and friends.
- Approximately 12% of male youth and 16% of female youth gambled three or more times in the past year on bingo; 26% of males and 19% of females on Sport Select/scratch and win; and 8% of males and 4% of females on VLTs.

The table below summarizes substance abuse patterns in the adolescent population. It provides some indication of the extent of youth smoking, use of street drugs, alcohol consumption, and drinking and driving by gender.

Adolescent Substance Abuse Patterns

Substances	Male	Female
Smoked cigarettes every day	34%	39%
Chewed tobacco once a week or more	13%	2 %
Used marijuana more than 12 times per year	30%	24%
Used cocaine at least once a year	8 %	5 %
Drank beer more than once a week	19%	8 %
Drank wine or hard liquor more than once per week	12%	6 %
Drove while intoxicated three or more times in the last year	20%	11%

- Youth were also asked about their experiences with violence. Twelve per cent of males and 4% of females reported being in a fight three or more times in the last year and 32% of males and 34% of females indicated that they were attacked by someone at least once in the past year.
- While growing up, 54% of males and 58% of females report that they had been spanked by their parents often or sometimes.
- 16% of males and 31% of females thought seriously about suicide often or sometimes in the past year.

From 1989 to 1996, there were 5,445 hospitalizations for mental and behavioural disorders (e.g. anxiety disorders, alcohol and drug-related conditions; stress and adjustment disorders; psychoses; depression and eating disorders) among youth 10 to 19 years of age, 2,223 of whom were males and 3,222 of whom were females. Rates of hospitalization for mental and behavioural disorders were higher among females than males in all population groups. The highest rates occurred among Treaty Indian youth.[16]

❖ Promising New Approaches — Provincial

Youth Suicide Intervention and Trauma Response Program

Over the past nine years, Saskatchewan Health has funded and organized a network of mental health professionals in 11 health districts across the province to provide youth suicide prevention and intervention as well as psychosocial trauma response services. *The Youth Suicide Intervention and Trauma Response Program* has enabled health districts to strengthen their capacity and the capacity of some of their communities to respond to youth suicidal behaviours and psychosocial trauma. The program is currently focusing on the northern part of the province where these issues are most prevalent. While the reasons for youth suicide are often complex, this program is thought to have contributed to the levelling off of the youth suicide rate that began in the mid-1980s.

The table below summarizes substance abuse patterns in the adolescent population. It provides some indication of the extent of youth smoking, use of street drugs, alcohol consumption, and drinking and driving by gender.

Adolescent Substance Abuse Patterns

Substances	Male	Female
Smoked cigarettes every day	34%	39%
Chewed tobacco once a week or more	13%	2 %
Used marijuana more than 12 times per year	30%	24%
Used cocaine at least once a year	8 %	5 %
Drank beer more than once a week	19%	8 %
Drank wine or hard liquor more than once per week	12%	6 %
Drove while intoxicated three or more times in the last year	20%	11%

- Youth were also asked about their experiences with violence. Twelve per cent of males and 4% of females reported being in a fight three or more times in the last year and 32% of males and 34% of females indicated that they were attacked by someone at least once in the past year.
- While growing up, 54% of males and 58% of females report that they had been spanked by their parents often or sometimes.
- 16% of males and 31% of females thought seriously about suicide often or sometimes in the past year.

From 1989 to 1996, there were 5,445 hospitalizations for mental and behavioural disorders (e.g. anxiety disorders, alcohol and drug-related conditions; stress and adjustment disorders; psychoses; depression and eating disorders) among youth 10 to 19 years of age, 2,223 of whom were males and 3,222 of whom were females. Rates of hospitalization for mental and behavioural disorders were higher among females than males in all population groups. The highest rates occurred among Treaty Indian youth.[16]

❖ Promising New Approaches — Provincial

Youth Suicide Intervention and Trauma Response Program

Over the past nine years, Saskatchewan Health has funded and organized a network of mental health professionals in 11 health districts across the province to provide youth suicide prevention and intervention as well as psychosocial trauma response services. *The Youth Suicide Intervention and Trauma Response Program* has enabled health districts to strengthen their capacity and the capacity of some of their communities to respond to youth suicidal behaviours and psychosocial trauma. The program is currently focusing on the northern part of the province where these issues are most prevalent. While the reasons for youth suicide are often complex, this program is thought to have contributed to the levelling off of the youth suicide rate that began in the mid-1980s.

Teen Wellness Centres

Over the past few years, nine *Teen Wellness Centres* have been established across the province in Regina, Prince Albert, Biggar, Moose Jaw, Lashburn, Swift Current, Saskatoon, La Ronge, and La Loche. These centres provide locally-determined services and programs dealing with skill development and self-esteem to help young men and women cope with many issues including sexual health. The services and programs aim to address many of the attitudes and practices identified in the 1996 *Saskatchewan Youth Attitudes Survey*.[17] An evaluation conducted in 1997 found the centres contributed to increasing the capacity of communities to support and deliver these kinds of services and programs to their youth.

❖ Promising Approaches — Local

Interagency Youth Leadership Committee in Southeast Saskatchewan

In the southeast part of the province there are a number of local *Child Action Plan* committees. Many committee members found that in their community, youth were engaging in risk-taking behaviours such as substance abuse, vandalism and bullying. While traditional recreation and leisure programs were available, community members began to realize alternative programs that were noncompetitive and accessible to **all** young men and women might be an effective way to involve youth who were not participating in existing programs. This realization culminated in the development of the *Interagency Youth Leadership Committee*. Members of the committee include Yorkton Leisure Services, Yorkton Youth Outreach, Sturgis/Preeceville/Endeavour Family Resource Center, Yorkton RCMP, Canora Leisure Services, Rural Outreach Program, East Central Health District, the Parkland Regional Recreational Association, and the Southeast Child Action Plan Committee. The vision of the Interagency Youth Leadership Committee is to provide youth with opportunities to access youth leadership training.

Leadership training is typically made available to youth who already demonstrate leadership qualities and skills; however, the committee wanted to reach youth in the larger population who had not been identified as potential leaders. The committee felt strongly that if youth were given the opportunity to develop their own leadership skills, their increased self-esteem and confidence would lead to positive and healthy lifestyle choices.

Committee members found that youth participating in the student leadership program discovered their leadership capacity, developed leadership skills and began to see themselves as positive role models in their communities. The Committee has already made significant progress with over 100 students in Yorkton and area participating in the Leadership Training; and over 80 Leadership Training participants taking further training at a Leadership Summer Camp. Future plans include the development of an additional phase to give trained youth leaders an opportunity to be involved

in their respective communities in a leadership capacity. To quote Shelley Keyes, Community Support Worker, "buckle your seat belts, get ready . . . As the root issues are addressed, youth will bloom into flowers that are as glorious as they are resilient . . . stay tuned for further details."

Children's Opportunities for Healthy Development

In La Loche, the *Teen and Young Parent Program* of Social Services and the Dene Kwan Self-Help Council worked in partnership to develop a project that brings youth together to learn and develop positive lifestyles. *Children's Opportunities for Healthy Development* combines workshops, conferences and family gatherings for youth who deal with peer pressure, drug and alcohol abuse, high crime rates and poor employment prospects. To date, over 150 youth aged 12 to 18 have benefitted from the program.

Comments from those attending a workshop on suicide prevention included: "We need the community to go to workshops . . . This is for everyone. . . Perhaps have another workshop reaching younger kids in a way that would help them notice symptoms in their older siblings." Parents who attended craft and cultural gatherings commented: "I would like to see more programs like this one . . . Anything that involves the family and gives me something to do . . . The youth here tonight were proud of what they made and were excited about showing mom and dad when they got home . . . This project sends a child home in the evening with pride."

Children Are Socially Responsible and Engaged

Positive Relationships

The strength and quality of children's relationships have proven to be important in reducing the possible negative effects of stressful life experiences or behavioural problems. *The National Longitudinal Survey on Children and Youth* indicates that in 1996, the vast majority of the children in Saskatchewan (93%) had two or more close friends and many (40%) had at least four close friends. This is comparable to findings in the NLSCY for 1994/95.

The amount of time that children spend together has changed somewhat between 1994 and 1996 according to the *National Longitudinal Survey on Children and Youth*. Whereas 58% of Saskatchewan children did things with their friends at least four days each week, this figure has fallen to 50%. There has also been an increase among children who never play or who only play with their friends one to three days a week. Finally, there has been a large drop, from 84% to 69%, in the number of parents who claim to know their children's close friends by sight and by first and last name.

Overall, children in Saskatchewan, similar to children across Canada, tend to get along with others.[18] Fifty per cent of the children had parents who reported in 1996, over the previous six-month period, that their children got along very well

Personal health practices and coping skills, which seem to be acquired primarily in the early years of life, have been identified as a key determinant of health. Effective coping skills for example, enable people to be self-reliant, solve problems and make informed choices that improve their overall health. These skills help people deal with life's challenges in a positive way, rather than engaging in risky behaviours such as alcohol or drug abuse.

(*Investing in the Health of Canadians*, Health Canada)

with other children, and 37% got along quite well. Seventy-five per cent of the children aged four to 11 were reported to get along very well with their teachers, slightly less than the national average of 82%. Parents also reported that most of their children get along very well or quite well with them with only 18% in 1994 and 23% in 1996 reporting that there were occasional problems.

According to the 1996 *Saskatchewan Youth Attitudes Survey* on attitudes and practices of Saskatchewan youth aged 13 to 18 years[19]:

- 60% of males and 64% of females like spending time with family; and
- 60% of males and 80% of females report friends will help them if needed.

❖ Promising New Approaches — Provincial

The Youth Services Model

People in Saskatchewan rely heavily on the police and the courts to deal with youth misconduct. This means that many troubled youth are brought into the criminal justice system for a range of offenses such as peer conflict to more serious offenses such as repeat car thefts. A balanced approach is needed to deal with this wide range of offenses.

Aboriginal youth tend to be over-represented in the justice system. While they make up 14% of the youth population, they represent 60% of the youth on probation and over 75% of the youth in custody.

Reforms to the youth justice system have been underway on a number of fronts for the past several years. The federal government, the Federation of Saskatchewan Indian Nations, the Métis Nation of Saskatchewan and the province continue to pursue reforms that seek to hold offending youth accountable for their behaviour in ways that support their rehabilitation, protect the public, respond to the needs of victims and community members.

In response to this reform agenda Saskatchewan established a *Youth Services Model*, a major initiative undertaken by the Departments of Social Services, Justice, Education and Health in 2000/01. The *Youth Services Model* consists of a policy framework intended to respond to pending federal changes to the *Young Offenders Act*, strategic justice plans established by First Nations and Métis leaders and recognition by the province that we need to improve the way we deal with youth who offend or are at-risk to offend. The model provides direction to all those who work with these youth by developing services and practices that have more positive outcomes for youth, their families, victims and communities. It builds on existing services that have been shown to work.

The model brings together all levels of government including Aboriginal governments and community-based organizations to:

- develop programs and services to help these young people make good future choices and to prevent or reduce further offending;
- support at-risk youth to complete school, get jobs, and take part in community life;
- provide treatment to enable youth to live healthier lives;
- have more youth take responsibility for their actions in the community instead of going through the court system; and
- contain or reduce the number of youth in custody.

With this new direction, more youth will be held accountable for their actions and understand the harm they have done. The goal is to teach youth how they can make a positive contribution to society by taking responsibility for their actions and by addressing the underlying causes of misconduct.

The *Youth Services Model* will be piloted over the next two to five years in Regina and Prince Albert beginning in 2000/01. As the *Youth Services Model* begins to demonstrate success at the pilot sites and as other communities are ready, the model will be extended to other communities.

Serious Habitual Offender Comprehensive Action Program (SHOCAP)

As noted, a balanced approach is needed to deal with the wide range of offenses that constitute youth misconduct. Saskatchewan people expect the government to maintain common sense and compassion for young people who do thoughtless things, but are willing to learn from their mistakes. Saskatchewan people also expect that society is protected from repeat and violent offenders.

In Regina, Saskatoon and Prince Albert, a large proportion of residential burglaries, car thefts and acts of violence are committed by a very small group of repeat and chronic youth offenders. SHOCAP is a program specifically designed to deal with this small group.

Police services in the three cities work in partnership with the Saskatchewan Departments of Justice and Social Services and community agencies. Maintenance of comprehensive files on repeat offenders enables prosecutors to make appropriate recommendations regarding bail and sentencing. Intensive, co-ordinated supervision and monitoring of repeat youth offenders results in significant reductions in offending behaviour.

A recent evaluation of SHOCAP noted that there are currently 67 youth in the program, but more importantly, five young people have left the program because they have not committed an offence in one full year.

Mind the Gap Youth Symposium

Youth are frequently described as our future. Young people from across Saskatchewan have been saying that they want to participate in decision-making and policy development, particularly when decisions and policies affect them. In 1998, the *Saskatchewan Council on Children* published it's Second Report. The *Mind the Gap Conference* was initiated as a result of the recommendations outlined below.

- Youth participation in Government and government funded programs and services needs to be increased substantially. Government should take a lead role in modelling how youth can effectively and successfully contribute to policy formulation and program development.
- Specific, well-defined guidelines should be developed for use by government and community agencies. The guidelines should promote the involvement of youth in all levels of decision-making and provide information about how to ensure that youth are fully involved.
- Educational programs for adults about involving youth in decision-making should be developed.
- Educational programs for youth should be developed to enable them to participate and contribute effectively.

Mind the Gap comes from the London Subway slogan alerting passengers to watch the gap between the train and the landing. It also reminds us that we, too, need to mind the gap between adults and youth and work to close the gap. The conference was planned in partnership with the *Provincial Youth Delegation, Saskatchewan Children's Advocate Office, Saskatchewan Council on Children and the Interdepartmental Child Action Plan Steering Committee.*

Saskatchewan youth, along with adult support, were *Minding the Gap* the weekend of November 18 - 20, 2000. Approximately 100 youth from across the province gathered in Bruno where they were led by youth in group discussions, games and team-building exercises. The barriers between youth and adults were identified and discussed. The conference culminated with adults and youth coming together on November 20, National Children's Day. Youth presented their ideas and recommendations for youth involvement using a number of creative mediums to communicate their message including the following:

Theme #1 - The Media

Strategies:

- Keep news unbiased by working alongside representatives of the media.
- Provide funding and support for youth initiated media activities.
- Have youth encourage other youth to become involved in positive activities.
- Create youth/adult alliances to overcome barriers.
- Make changes to advertising.

Theme #2 - Inaccurate Assumptions Regarding Youth

Strategies:

- Implement programs to raise awareness of youth issues in schools and the community.
- Give more media coverage for the positive things youth are doing.
- Integrate adults and youth into each other's programs to better understand why there are barriers between adults and youth.

Theme #3 - Making Decisions

Strategies:

- Improve and facilitate open communication between adults and youth.

Theme #4 - Tokenism and Logistics of Youth Representation

Strategies:

- Make adults realize that youth are good resources and can be helpful. Youth need adults to really want youth to be there. Adults need to be made aware of youth issues from a youth viewpoint.
- Get youth on boards involving youth issues.
- Make youth effective members by assigning mentors, clarifying their role and being flexible around timing, dates for meetings, dress and etiquette.

Theme #5 - Youth Sexual Health and Ill Health

Strategies:

- Have adults and youth work together in joint counselling initiatives in schools.
- Develop youth teams, which would travel around Saskatchewan to share experiences and talk about self-esteem issues.
- Have adult experts who present information to youth include youth in their presentations. This could improve the reception of messages by the youth.
- Saskatchewan school curricula should include a sex education course that has input from both teachers and students. Individuals, agencies and the community should be encouraged to advocate for the government to make this change.

Theme #6 - Involving Youth at Risk

Strategies:

- Address Young Offender services by involving youth in young offender facilities to look at what is working to prevent re-offending.
- Implement the Youth In Care Network.
- Address Sexual Abuse/Sexual Exploitation by creating tougher *John Schools* and inviting young people involved in the sex trade to help identify solutions.
- Address child abuse by supporting young people to leave abusive relationships, tracking youth entering foster case, providing more information and training in schools about child abuse, and informing youth of their rights when entering foster care.

Theme #7 - Youth Leadership/Skill Development

Strategies:

- Develop a youth/adult partnership model to give adults and youth the skills to work effectively within the community. The model would focus on attitude, skills and information.
- Implement the model to teach other youth and adults how to engage in meaningful partnerships. This could be accomplished through conferences, workshops and the development of educational materials.

Copies of the proceedings from the Conference will be available in the spring of 2001 through the Children's Advocate Office by calling 306-933-6700.

❖ Promising New Approaches — Local

Green Tree Vocational Forestry Program

An exciting partnership has developed between the SIAST campus in Prince Albert, the Departments of Social Services and Post Secondary Education and Skills Training, Prince Albert Grand Council and Green Tree Fencing and Transport Ltd. The *SIAST-Green Tree Vocational Forestry Program* directly benefits youth at the Nisbet Youth Centre, a secure custody facility for young offenders. Two years ago, Green Tree opened up shop next to the Youth Centre. They were soon approaching Nisbet with an interest in providing employment and training opportunities for the youth at the Centre. The idea took off with Post Secondary Education and Skills Training contributing some start-up funding and the Prince Albert Grand Council providing a wage subsidy for First Nations youth.

Twelve youth have been involved since the program began in March 2000, with nine young men successfully completing the vocational forestry program and gaining skills in an industry that is expected to rapidly expand in the coming years. Partners in the program are now working on building relationships with other prospective employers to enable youth to move directly from custody into employment. The *SIAST-Green Tree Vocational Forestry Program* helps to address the underlying causes of crime by offering young people marketable skills with which to return to their communities.

Children Are Knowledgeable and Skilled

Literacy is one of the Keys to Lifelong Learning

The *National Longitudinal Survey of Children and Youth* found that 73% of Saskatchewan children aged two to 11 were read to or were assisted with their reading on a daily basis in 1996, an increase from 69% in 1994.[20] Another 22% of the children in this age group read with adults a few times a week. Increasingly, according to their parents, children aged seven to nine years are reading on their own for pleasure; 57% of them read or attempted to read by themselves each day in 1996. Another 32% of the children read on their own at least once a week. The proportion of children who read daily is similar to national averages.

❖ Promising New Approaches — Provincial

The Family Literacy Initiative

Research shows that Family Literacy programming is one of the most effective ways to instill in preschool children a positive attitude toward reading and learning. Recognition of the power of the parent as a role model and coach contributed to the development of *The Family Literacy Initiative*. This addresses the varied learning needs of parents and children within a family unit and provides opportunities for families to read and learn together.

Introduced in 1998/99 by Saskatchewan Post-Secondary Education and Skills Training (PSEST), this initiative provides funding to community partners to provide family literacy programs and services in a variety of settings. Regional colleges and literacy organizations such as the Saskatchewan Literacy Network, READ Saskatoon, Regina Public Library and the Prince Albert Literacy Network have played a lead role in promoting and delivering family literacy programs and services.

In 1999/2000, 836 people directly participated in two provincial and 20 regional literacy projects. Funding for each of these projects ranged from $2,000 to $50,000, reflecting different needs. Many new community partners are beginning to understand the benefits of family literacy programming and partnerships, and are eager to become involved. These include community-based literacy organizations, regional libraries, school divisions, early childhood learning centres, Aboriginal Headstart programs, public health districts and in some parts of the province, Tribal Councils. As part of the initiative, the Service Fransaskois d'Education des Adultes coordinates and delivers francophone family literacy programming in the province.

Health status improves with level of education. Education is also closely tied to socioeconomic status. An effective education for children and life long learning for adults are key determinants for health and prosperity. Education equips people with the knowledge and skills they need for problem-solving and provides a sense of mastery and control over life circumstances. Education increases opportunities for job and income security. Individuals with low literacy skills are more likely to be unemployed, and poor, to suffer poorer health and to die earlier than Canadians with high levels of literacy.

(*Toward a Healthy Future — Second Report on the Health of Canadians*, Health Canada).

Children And Youth Succeed in School

Since 1991/92, about 78% of the students enrolled in Grade 10 graduated from Grade 12, some requiring more than the typical three years. First year, first-time university enrolment in Saskatchewan equals about one-quarter of the previous year's Grade 12 population, showing a slight decrease in enrolment from 1991/92 (28%). Other Grade 12 graduates attend SIAST, regional colleges or other colleges. In 1997/98, 2,525 youth under age 20 applied to SIAST. Other Grade 12 graduates decide to immediately enter the workforce.[21]

In both Saskatchewan and Canada, younger people have higher levels of educational attainment than older people. In comparison to youth across Canada, Saskatchewan youth have lower levels of educational attainment. In 1996, for Saskatchewan residents aged 20 - 24, 71.9% had completed a degree, diploma, or certificate, higher than the 57.5% who had done so in 1986.

Aboriginal students in Grades 5, 9, and 12 typically leave, join or rejoin school more frequently than non-Aboriginal students. The mobility rate increases from Grades 5 to 9 to 12. Of the Grade 5 students leaving school during the school year, a family move was the most common reason, accounting for 68% of non-Aboriginal and 57% of Aboriginal student moves. The second most common reason was a change in family situation: 26% of Aboriginal students and 11% of non-Aboriginal students left for this reason. Of students who joined or re-joined a school during the school year, 31% came from other schools in the same division, 29% from schools in other Saskatchewan divisions and 12% from First Nations schools or schools in other provinces. (Note: 26% came from the same school after being away for awhile.)

❖ Promising New Approaches — Provincial

Special Education Review

The *Special Education Review*, conducted by a five-member committee, was initiated in September 1998 and submitted its report, *Directions for Diversity: Embracing Supports for Children and Youth with Diverse Needs*, to the Minister of Education in February 2000. The report reflects upon the development and current status of programs and services for exceptional children and youth. It promotes the concept of "diversity" to reflect more realistically on the wide range of needs that students bring to schools. The 59 recommendations outlined in the report focus on ways to strengthen the supports necessary in educating Saskatchewan's children and youth with diverse needs.

The Minister of Education released his response to the Special Education Review Committee's report in October 2000. *Strengthening Supports* is a broad framework that sets a direction for education partners and stakeholders to implement the recommendations made by the Special Education Review Committee. Key areas outlined in *Strengthening Supports* are adopting the language of diversity, affirming the philosophy of inclusive schools and developing and implementing a guide for effective practices. As well, commitments were made to increase funding toward student diversity and to enhance service integration.

Role of Schools Dialogue

Society's expectations of schools are changing and growing. Teachers and boards of education are increasingly being challenged to meet these growing expectations. For this reason, in 1999 the Role of Schools Task Force was formed. The role of the Task Force was to engage the education community, human service sectors, government, families and communities in a meaningful and informed dialogue on the role of schools.

Consultations have been conducted throughout the province and an interim report with thirteen recommendations was released in October 2000. The final report is to be provided to the Minister of Education early in 2001.

Community Schools

In Saskatchewan, there are 31 urban and ten northern *Community Schools*. *Community Schools* are located in high need areas. Many of the children attending *Community Schools* face a number of risk factors, including family dysfunction, family transience, alcohol and drug abuse, low parent education levels and teenage parents.

In response, *Community Schools* provide a range of supports and services to meet the needs of students, their families, and the community. One of the essential components of the *Community Schools* model is creating a culturally affirming environment. Examples of this include bringing Aboriginal Elders

into the school to teach cultural traditions or to counsel students and their families, and developing the school's code of ethics based on traditional Aboriginal values.

Another major component is focusing on a learning program that not only includes students, but preschool children and adults. Urban *Community Schools* provide prekindergarten programming and most co-ordinate adult education classes, whether on an after-school basis, or through longer full-time employment training programs. *Community Schools* also include the parents and community involvement, integrated services and community development.

By involving families and the community, and by providing a responsive learning program, *Community Schools* attempt to address the barriers to a child's or young person's success in school and in life.

Aboriginal Elder/Outreach

In 1999, Saskatchewan Education introduced the *Aboriginal Elder/Outreach Program*. Aboriginal resource people, such as Elders, outreach workers or cultural advisors are brought into schools where they each play a vital role in creating a culturally affirming school environment. These resource people link students, staff, families and community to Aboriginal cultures and traditions, as well as bring an enhanced Aboriginal perspective to the school.

Children and Youth Participate in Organized Sporting Activities

Opportunities and activities for children and youth in their communities are important to their physical and emotional development. A slightly larger proportion of children aged four to nine years in Saskatchewan than in Canada (27% compared to 24%) were involved most days or a few times a week in some form of organized sporting activity other than dancing, gymnastics or martial arts.[22] A large proportion of children, 47% in Saskatchewan and 51% in Canada, are almost never involved in any form of organized sporting activity, although some of these children may very well be involved in dance, gymnastics or martial arts.

Youth Participate in Nature-Related Activities

Park participation statistics for 1999 show that 15,763 students in about 400 schools or youth groups participated in 895 programs at provincial recreational, natural environment and historic parks. Many children and families benefitted from the opportunity to engage in activities together at provincial parks.

Sixty-six per cent of Saskatchewan youth aged 15 to 19 years participated in direct nature-related activities. The *1997 Survey on the Importance of Nature to Canadians* addressed to residents aged 15 and older found that Saskatchewan youth had higher participation rates than Canadian youth for picnicking, camping, swimming and beach activities, canoeing and kayaking, relaxing in an outdoor setting, visiting parks and protected areas.[23] The Saskatchewan youth had a much higher rate for recreational fishing, and around double the Canadian rate for

power boating and hunting. Other common activities included: photographing and sightseeing in natural areas, gathering nuts, berries and firewood, hiking or backpacking and cycling.

❖ Promising New Approaches — Provincial

Saskatchewan Lotteries Trust Fund for Sport, Culture and Recreation — The Provincial Delivery System

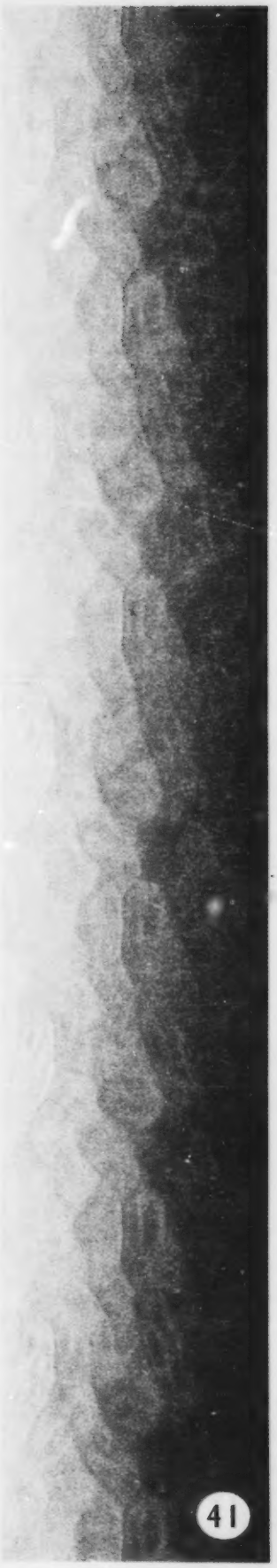
In Saskatchewan, net lottery profits from the sale of lottery tickets by the Western Canada Lottery Corporation are transferred to the Saskatchewan Lotteries Trust Fund for Sport, Culture and Recreation. These net profits are distributed 50% to sport, 35% to culture and 15% to recreation groups. The goals of the Trust Fund include providing accessible and equitable program opportunities particularly for vulnerable children, youth and families, Aboriginal persons, residents of northern Saskatchewan, older adults, women and disabled persons.

SaskSport Inc., SaskCulture and Saskatchewan Parks and Recreation Associations (SPRA) ensure the distribution of the Fund addresses the well-being of people and communities in the province. Revenue permitting, SaskSport Inc., SaskCulture and SPRA work to address priorities that include the development of community youth centres, enhancement of the northern community school program, enhanced multicultural funding, and team development and high performance training for the Canada Games being hosted in Saskatchewan in 2005.

Spruce Krew Kids Klub

Over the past two summers, a pilot project called the *Spruce Krew Kids Klub* has been operating in some of the provincial parks in Saskatchewan including Cypress Hills, Pike Lake, Echo Valley, Meadow Lake, and Greenwater Lake. In the summer of 1999, over 1,200 people, including 847 children aged three to eleven, 263 youth aged 12 to 17, 90 parents and 39 youth leaders were involved.

Spruce Krew involves parents and communities by encouraging individuals to work together on projects to help preserve and protect the environment. The program helps children and youth develop self-esteem while promoting environmental awareness and team building. Activities include trail and riverbed revitalization, tree planting, conversion of planted beds to xeriscape, and beach and day use area cleanup. One of the main benefits of the *Spruce Krew Kids Klub* is a change in the attitude of youth and adults from, "What could a bunch of kids do?" to, "Hey, look what a bunch of kids can do!" Recreation programs within our provincial parks play a role in developing healthy children and youth by encouraging physical activity and participation in outdoor activities. Involvement in recreation at an early age contributes to ensuring children grow into healthy adults.



Children Are Culturally Connected

Health Canada has identified culture as a key determinant of health. The additional health risks faced by certain persons or groups may be due to conditions such as marginalization, stigmatization, loss or devaluation of language and culture and lack of access to culturally appropriate health care and services.

(*Population Health Promotion Model: A Resource Binder*, Saskatchewan Health).

Aboriginal people form a higher percentage of the population in Saskatchewan than in any other province. However, they are among the most disadvantaged. The need for access to opportunities and supportive environments that break the cycle of poverty, abuse, criminal behaviour, lack of cultural identity, low education levels, and low self-esteem is obvious from the demographics.

Data from the 1996 Census of Population on the highest level of schooling shows that for the population aged 15 and older, there are distinct differences between the Aboriginal and the non-Aboriginal population. For example, 12.3% of the non-Aboriginal population has less than a grade nine education compared to 23.1% of the Aboriginal adult population. Among First Nations living on-reserve this figure increases to 32.2%.

In contrast, almost one-quarter (22.3%) of non-Aboriginal adults report that they have some university education compared to 9.9% of First Nations living on-reserve, and 19.2% living off-reserve.

A similar pattern emerges for young men and women in the population aged 15 to 19 years where 2.8% of the non-Aboriginal population report less than a grade nine education compared to 24% of First Nations youth living on-reserve.

Non-Aboriginal male adults are more likely (76.3%) to be active participants in the labour force. In contrast, 59.2% of the male Aboriginal population report that they are working or looking for work. A similar pattern is noted for Aboriginal female labour market participation rates — 54.2% compared to 61.6% of the non-Aboriginal female adult population.

At the time of the census, employment income was reported to be lower for Aboriginal males living off-reserve (approximately $30,000) compared to non-Aboriginal males (approximately $35,000).

❖ Promising New Approaches — Provincial

National Aboriginal Youth Strategy

Aboriginal youth represent the fastest growing segment of the youth population. They also face many more challenges than other youth. High levels of poverty, unemployment, suicide, low education levels, lack of access to basic health care services, and the deterioration of labour market standards are some of the multiple barriers to the socioeconomic participation of Aboriginal youth.

The *National Aboriginal Youth Strategy* is based on the belief that solutions and results can be realized when all stakeholders, including Aboriginal communities, governments and institutions, the private sector, community and voluntary agencies and individuals, work together in true partnership. The *Strategy* envisions Aboriginal youth having opportunities to pursue the

career and quality of life goals in support of individual choices, as well as supporting the social and economic aspirations of Aboriginal communities.

Federal, Provincial, Territorial and National Aboriginal Organizations have worked together to develop the *National Aboriginal Youth Strategy* in an attempt to address the depressed socioeconomic status of Aboriginal youth in Canada. The *Strategy* contains principles, goals, suggested initiatives to enhance conditions for Aboriginal youth, suggestions for linkages to other processes, and a variety of youth demographic data. It provides a framework to guide future work in the development of programs and services for Aboriginal youth, and suggests how Aboriginal youth can be involved in the decision-making process.

A national Aboriginal youth conference will be held in the Fall of 2001 in Calgary, Alberta. Up to 150 Aboriginal youth delegates from across Canada, representing each of the five national Aboriginal organizations, will attend the conference to lend further direction and support to the Strategy. A plain language version of the Strategy has been developed for use by delegates at the conference.

❖ Promising New Approaches — Local

Urban First Nations Services

Under the direction of the Saskatoon Tribal Council Chiefs, *Urban First Nations Services* is a non-profit organization providing a range of programs and services for First Nations individuals and families living in the City of Saskatoon. The vision of the organization is to develop and provide services based on holistic, spiritual, mental, physical and social development of First Nations people.

Some of the services available through the STC Family Centre include:

- linking with other agencies, organizations and all levels of government on behalf of First Nations families to help them access information and services;
- helping First Nations people prepare for employment through employment counselling, developing partnerships with potential employers, and matching work-ready people with employer requests;
- offering sponsorship and training opportunities (e.g. tuition, living allowance, and wage subsidies);
- sentencing alternatives for youth who have come into contact with the youth justice system (e.g. Family Group Conferencing);
- ensuring First Nations parents have the skills they need to give their children the best possible start in life (e.g. home visitors model healthy interactions with children and provide parents with an opportunity to discuss their parenting issues); and
- ensuring children learn about their heritage and culture by storytelling, crafts, and talking to elders.

Children's Budget for 2000/01

New funding for *Saskatchewan's Action Plan for Children* in 2000/01 enhances early childhood development, care and learning; addresses social, emotional and behavioural challenges in children and youth; and strengthens communities. For 2000/01, funding for initiatives profiled under the *Child Action Plan* increased to $22 M for a cumulative total of $74 M. This includes a reduction of $14.7 M for time limited programs and includes a provincial reduction of $13.6 M in the Saskatchewan Child Benefit program, which will be offset by Federal increases to the National Child Benefit. Enhancements for 2000/01 include the following:

Young Children Get a Good Start in Life

- ***Child Care Enhancements — $500,000, Social Services***
  As part of a four-year commitment of $500,000 per year, licensed child care service providers receive $500,000 to support early childhood learning and care.
- ***Infant Mortality Prevention — $135,000, Health***
  A provincial infant mortality coordinator works with health districts, health professionals, First Nations and communities to enhance programs and services for mothers and infants. The Saskatchewan Institute on the Prevention of Handicaps held a symposium in November 2000 to develop intersectoral strategies to reduce the unacceptably high number of infant deaths in Saskatchewan.

Addressing the Needs of Vulnerable Children and Youth

- ***Special Education and Community Education — $15.5 M, Education***
  This funding provides reprofiled additional support to students with disabilities, including students with social, emotional and behavioural challenges; additional services to 10 northern Community Schools and 13 additional prekindergarten classes; support for Aboriginal Elders and other outreach workers in schools; and enhanced integrated services programs across the province.
- ***Bridgepoint Centre for Eating Disorders — $150,000, Health***
  This funding provides further support to Bridgepoint Centre, a residential treatment program in Milden for adults and adolescents with eating disorders.
- ***Injection Drug Use — $356,000, Health***
  This funding allows an increase in the treatment of youth with injection drug use problems.
- ***Saskatoon City Project — $266,000, Health, Social Services and Justice***
  The Saskatoon City Project is a multi-purpose health and recreation facility for children and youth in Saskatoon's core area. This funding supports the development of the Project.

- ***Intersectoral Youth Program — $620,000, Health***
  This funding supports the development of two pilot projects on alternatives to youth custody. It also enables health districts in Regina, Saskatoon, Prince Albert, Battlefords and Yorkton to collaboratively address the needs of children and youth who would likely end up in the youth criminal justice system without intensive early intervention and support.

- ***Integrating Mental Health and Addiction Services to Young Offenders — $95,000, Health***
  Funds are being provided to Regina Health District to develop a service model based on best practice and empirical evidence which integrates mental health and addiction services to criminally involved youth. It will involve a review of best practice literature, consultation with community stakeholders and build on the work already completed by alcohol and drug services in order to reflect a continuum of care for youth in the community as well as in custody.

- ***Hepatitis A Immunization — $5,000, Health***
  This enhancement increases the total contribution for this program from $230,000 to $235,000.

- ***Child-Centered Family Justice Fund — $310,000, Justice***
  Saskatchewan is accessing new federal funding from the Child-Centered Family Justice Fund to support expansion of parent and child education, support the development of dispute resolution approaches for dealing with support variation, support provincial consultations on family law issues and the evaluation of family law services.

Strengthening Communities

- ***Northern Housing Initiatives — $3 M, Municipal Affairs, Culture and Housing***
  Providing $3 M over three years for a total of $9 M. Announced in 2000, this set of initiatives is designed to meet the shelter needs of northerners in the areas of home ownership, rental housing repairs and social housing.

- ***Neighbourhood Development Organizations (NDO's) — $250,000, Economic and Cooperative Development***
  Launched in August 1998, and managed by the Departments of Economic and Cooperative Development and Social Services, this program provides funding to support the development and operation of multipurpose community economic development organizations in low-income urban neighbourhoods. To date, NDO's have been established in Prince Albert, Saskatoon and Regina. Funding for 2000/01 increases from $500,000 to $750,000.

- ***Moms On the Move Scholarships — $10,000, Women's Secretariat***
  Targeting single parent women, this one-time initiative awards ten $1,000 scholarships to young women who have successfully completed one year of full-time post-secondary study and are enrolled in their second year of study.

- ***Associated Entities Fund — $300,000, Municipal Affairs, Culture and Housing***
  Representing the community grants component of the *Child Action Plan*, this enhancement brings total funding to $2 M in support of community-based programs.

- ***Spruce Krew — $30,000, Saskatchewan Environment and Resource Management***
  Provincial park program involving children and youth in environmental stewardship team-building and leadership skills. Special funds to carry on the pilot program in summer 2000, and to adapt the program so it can be offered on an ongoing basis within existing resources in the provincial parks system in 2001.

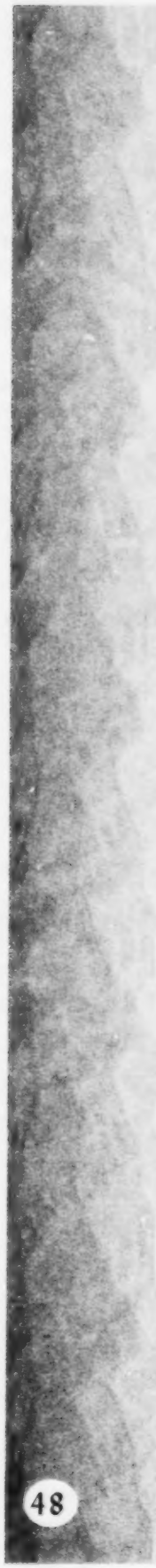
Next Steps and Conclusion

We envision children living within families and families positioned within caring communities. We know that a multitude of factors affect the well-being of children and their families. While most children and youth in the province are doing relatively well, those living in low-income single-parent families may be more vulnerable to experiencing negative outcomes later in life. There are likely a variety of reasons for this ranging from poverty and economic insecurity, low parental education levels to levels of social support. Research also tells us that one of the most important factors that protects children against vulnerability is good parenting that cuts across all income levels. Evidence suggests that children who experience higher levels of parental involvement have fewer behavioural disorders and exhibit more pro-social behaviour. We also know that another key to child development is supportive community environments.

Since *Saskatchewan's Action Plan for Children* began nine years ago, there has been a growing interest in the health and well-being of children by government, service organizations, communities and families across the province. Many mechanisms at the provincial, regional and local levels have been put in place to plan, co-ordinate, advise, advocate, monitor and evaluate the actions taken to improve the health and well-being of Saskatchewan children. Enhancements to many existing programs and services for children and their families have been made and several new programs and services have been developed. Many of these programs and services are showing promising results.

However, we still face many challenges in Saskatchewan to ensure that all of our children are healthy and well cared for. The Government of Saskatchewan has embarked on a major initiative to promote integrated human services. By working more closely together across government and with communities, service organizations and businesses, we can achieve better outcomes for our children. The Government of Saskatchewan is also working closely with the federal government as well as with Aboriginal organizations throughout the province to optimize the healthy development and well-being of all Saskatchewan children.

We live in changing times. The structure of the family and work patterns are much different from 20 years ago. To better respond to the needs of our young people and families we need to track these changes, and the changes in our children. We are optimistic that by measuring and reporting on how children and families are doing, we will continue to sustain our commitment to children and families and share our successes by identifying what works.



End Notes

[1]Statistics Canada. 1998. Nation Series: Package No. 5: Aboriginal Data Products: *The Nation: 1996 Census of Population.* (Electronic Product 93F0025XDB96002).

[2]Federation of Saskatchewan Indian Nations, *Saskatchewan and Aboriginal Peoples in the 21st Century*, 1997.

[3]Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Centre for International Statistics: Ottawa, January 2000.

[4]Canada Mortgage and Housing Association, 1996 (based on 1996 census data).

[5]Indian and Northern Affairs Canada, *Backgrounder — Reduction of Social Assistance Dependency in Saskatchewan, August 2000.*

[6]Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Centre for International Statistics: Ottawa, January 2000.

[7]Ibid.

[8]Complex needs refers to a number of needs experienced by the child and his or her family necessitating the involvement of more than one service provider, organization or sector.

[9]Saskatchewan Health. *Health Service and Outcome Indicators Project by Population Group: Mothers and Infants*, 2000.

[10]Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Centre for International Statistics: Ottawa, January 2000.

[11]Habbick, B.F., Nanson, J.L., Snyder, R.E., Casey, R.E., and Schulman, A.L., *Fetal Alcohol Syndrome in Saskatchewan: Unchanged Incidence in 20-year Period.* Vol. 87, No.3, May - June, 1996.

[12]Canadian Institute of Child Health. *The Health of Canada's Children: A CICH Profile*, 3rd Edition, Ottawa, 2000.

[13]Saskatchewan Women's Secretariat. *Profile of Aboriginal Women in Saskatchewan.* November 1999; and Government of Canada. *Improving Social Security in Canada. Persons with Disabilities: A Supplementary Paper.* 1994. *This data does not include on-reserve populations and is based on a 1991 sample.*

[14]Federal/Provincial/Territorial Ministers Responsible for Social Services. *In Unison - A Canadian Approach to Disability Issues: A Vision Paper*, 1998. Also available at — http://socialunion.gc.ca.

[15]Saskatchewan Institute on Prevention of Handicaps. *Youth Speak Out: Attitudes and Behaviours Related to Youth at Risk in Saskatchewan*, 2000 (skiph@sk.sympatico.ca).

[16]Saskatchewan Institute on Prevention of Handicaps. *Critical Issues in Health for Saskatchewan Youth: 10-19 Years of Age*, 1989-1994; and *Mental and Behavioural Disorders and Hospitalizations*, 1995-1996, Saskatchewan Youth, March 2000.

[17]Saskatchewan Institute on Prevention of Handicaps. *Youth Speak Out: Attitudes and Behaviours Related to Youth at Risk in Saskatchewan*, 2000 (skiph@sk.sympatico.ca).

[18]Centre for International Statistics at the Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Ottawa, January 2000.

[19]Saskatchewan Institute on Prevention of Handicaps. *Youth Speak Out: Attitudes and Behaviours Related to Youth at Risk in Saskatchewan*, 2000 (skiph@sk.sympatico.ca).

[20]Centre for International Statistics at the Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Ottawa, January 2000.

[21]Saskatchewan Education. *1999 Saskatchewan Education Indicators: Kindergarten to Grade 12*, 1999.

[22]Centre for International Statistics at the Canadian Council on Social Development. *Profiling Children in Saskatchewan, 1994 and 1996*. Ottawa, January 2000.

[23]Statistics Canada. *The Importance of Nature to Canadians: A Statistical Compendium for Saskatchewan in 1996*, April 1998.